| Fill in this information to identify you                              |   |                                   |
|---|---|-----------------------------------|
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS |   |                                   |
| Case number (if known):   | Chapter you are filing under:  Chapter 7 Chapter 11 Chapter 12 Chapter 13 | ☐ Check if this is amended filing |

# Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

|    | art 1: Identify Yourself                                     |  |   |
|----|--|--|---|
| 1. | Your full name   | About Debtor 1:  | About Debtor 2 (Spouse Only in a Joint Case): |
| ١. |  |  |   |
|    | Write the name that is on your government-issued picture     | Kenneth  |   |
|    | identification (for example,                                 | First Name   | First Name                                    |
|    | your driver's license or                                     | C.   |   |
|    | passport).   | Middle Name  | Middle Name                                   |
|    |  | Tripp  |   |
|    | Bring your picture   | Last Name  | Last Name                                     |
|    | identification to your meeting                               |  |   |
|    | with the trustee.  | Suffix (Sr., Jr., II, III)   | Suffix (Sr., Jr., II, III)                    |
| 2. | All other names you  |  |   |
|    | have used in the last 8 years                                | First Name   | First Name                                    |
|    | Include your married or                                      | Middle Name  | Middle Name                                   |
|    | maiden names.  | Last Name  | Last Name                                     |
| 3. | Only the last 4 digits of                                    |  |   |
|    | your Social Security   | $xxx - xx - \underline{5} \underline{4} \underline{1} \underline{0}$ | xxx - xx                                      |
|    | number or federal<br>Individual Taxpayer                     | OR   | OR  |
|    | Identification number (ITIN)                                 | 9xx - xx   | 9xx - xx                                      |
| 4. | Any business names<br>and Employer<br>Identification Numbers | ✓ I have not used any business names or EINs.                        | ☐ I have not used any business names or EINs  |
|    | (EIN) you have used in<br>the last 8 years                   | Business name  | Business name                                 |
|    | Include trade names and                                      | Business name  | Business name                                 |
|    | doing business as names                                      |  |   |

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|---|--|---|--|--|
| First Name                                | About Debtor 1:  | About Debtor 2 (Spouse Only in a Joint Case):   |  |  |
|   |  |   |  |  |
|   | EIN  | EIN   |  |  |
|   | EIN  | EIN   |  |  |
| 5. Where you live                         |  | If Debtor 2 lives at a different address:   |  |  |
|   | 2521 E. 96th St.  Number Street  | Number Street   |  |  |
|   | Number Street  |   |  |  |
|   |  |   |  |  |
|   | Chicago IL 60617   |   |  |  |
|   | City State ZIP Code  Cook  | City State ZIP Code   |  |  |
|   | County   | County  |  |  |
|   | If your mailing address is different from<br>the one above, fill it in here. Note that the<br>court will send any notices to you at this<br>mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address. |  |  |
|   | 2521 E. 96th St.   |   |  |  |
|   | Number Street  | Number Street   |  |  |
|   | P.O. Box   | P.O. Box  |  |  |
|   | ChicagoIL60617CityStateZIP Code  | City State ZIP Code   |  |  |
| 6. Why you are choosing                   | Check one:   | Check one:  |  |  |
| this district to file for<br>bankruptcy   | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.   | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                              |  |  |
|   | I have another reason. Explain. (See 28 U.S.C. § 1408.)  | I have another reason. Explain. (See 28 U.S.C. § 1408.)   |  |  |
| Part 2: Tell the Cou                      | ırt About Your Bankruptcy Case   |   |  |  |
| 7. The chapter of the Bankruptcy Code you | Check one: (For a brief description of each, see N for Bankruptcy (Form 2010)). Also, go to the top of   | otice Required by 11 U.S.C. § 342(b) for Individuals Filir f page 1 and check the appropriate box.  |  |  |
| are choosing to file<br>under             | <b>⊘</b> Chapter 7   |   |  |  |
|   | Chapter 11   |   |  |  |
|   | Chapter 12   |   |  |  |
|   |  |   |  |  |

| Debi | cor 1 Case 16-01078                             | c. Doc 1                | Filed 01/14/16  Doctiment  | Entered 01  | 1/14/16<br>se number                        | 11:21:27<br>(if known)                               | Desc Main  |
|------|---|-------------------------|--|---|---|--|--|
|      | First Name                                      | Middle Name             | Destilane  | Page 3 01 5   | 07  | · /  |  |
| 8.   | How you will pay the fee                        | court<br>pay w          | pay the entire fee when<br>for more details about how<br>with cash, cashier's check,<br>f, your attorney may pay w | w you may pay. T<br>or money order.                               | Typically, if If your atto                  | you are paying<br>orney is submitt                   | the fee yourself, you may ing your payment on your |
|      |   |                         | d to pay the fee in install<br>duals to Pay Your Filing F  |   |   |  | attach the Application for                         |
|      |   | By la<br>than<br>fee in | 150% of the official povert  | required to, waive<br>ty line that applies<br>ose this option, yo | e your fee,<br>s to your fa<br>ou must fill | and may do so<br>mily size and yo<br>out the Applica | only if your income is less                        |
| 9.   | Have you filed for                              | <b>☑</b> No             |  |   |   |  |  |
|      | bankruptcy within the last 8 years?             | Yes.                    |  |   |   |  |  |
|      | ·   | District                |  |   | When  | Ca   | ase number   |
|      |   | _                       |  |   |   |  |  |
|      |   | District _              |  |   | When  | Ca   | ase number   |
|      |   | District _              |  |   |   |  | ase number   |
|      |   |                         |  |   | MM  | /DD/YYYY   |  |
| 10.  | Are any bankruptcy cases pending or being       | <b>☑</b> No             |  |   |   |  |  |
|      | filed by a spouse who is                        | Yes.                    |  |   |   |  |  |
|      | not filing this case with you, or by a business | Debtor _                |  |   |   | Relationship t                                       | o you  |
|      | partner, or by an                               | District _              |  |   | When  | Ca   | ase number,  |
|      | affiliate?                                      |                         |  |   | MM  | /DD/YYYY if  |  |
|      |   | Debtor _                |  |   |   | Relationship t                                       | o you  |
|      |   | District                |  |   | When  | Ca   | ase number,  |
|      |   |                         |  |   | MM  | /DD/YYYY if  | known  |
| 11.  | Do you rent your residence?                     | ✓ No.<br>☐ Yes.         | Go to line 12.<br>Has your landlord obtain<br>residence?   | ed an eviction juc  | dgment aga                                  | ainst you and d                                      | o you want to stay in your                         |
|      |   |                         | No. Go to line 12.   | Statement About   | an Eviction                                 | n Judament Aas                                       | einst You (Form 101A)                              |

and file it with this bankruptcy petition.

| Deb     | tor 1 Case 16-01078 c   | Do<br>iddle N |                    | Fi   | led 01/14/16<br>Doctiment                 | Enter<br>Page               | ed 01/14<br>4 of \$7         | 4/16 11:2<br>umber (if kno      | 21:27<br>pwn)            | Desc Main   |         |
|---------|---|---------------|--------------------|--|---|-----------------------------|------------------------------|---------------------------------|--------------------------|---|---------|
| Pa      | Report About An   | у Ві          | usine              | sses   | s You Own as a                            | Sole Pro                    | oprietor                     |                                 |                          |   |         |
| 12.     | Are you a sole proprietor of any full- or part-time business?   | <b>☑</b>      |                    |  | Part 4.<br>ne and location of bu          | siness                      |                              |                                 |                          |   |         |
| busines | A sole proprietorship is a business you operate as an   |               |                    | Nam  | ne of business, if any                    |                             |                              |                                 |                          |   |         |
|         | individual, and is not a separate legal entity such as a corporation, partnership, or LLC.  |               |                    | Nun  | nber Street                               |                             |                              |                                 |                          |   |         |
|         | If you have more than one   |               |                    | City   |   |                             |                              | <u></u>                         |                          | ZIP Code  |         |
|         | sole proprietorship, use a separate sheet and attach it   |               |                    | •  |   | 4                           |                              |                                 | C                        | Zii Code  |         |
|         | to this petition.   |               |                    | Check the appropriate box to describe your business:  Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above |   |                             |                              |                                 |                          |   |         |
| 13.     | Are you filing under<br>Chapter 11 of the<br>Bankruptcy Code and<br>are you a <i>small business</i>                               | can           | set ap<br>st recei | prop   | riate deadlines. If yo                    | ou indicate<br>ent of opera | that you are<br>ations, cash | e a small bus<br>i-flow stateme | iness deb<br>ent, and fe | business debtor so the<br>stor, you must attach you<br>ederal income tax retur<br>16(1)(B). | our     |
|         | debtor?   |               | No.                | I an   | n not filing under Cha                    | apter 11.                   |                              |                                 |                          |   |         |
|         | For a definition of small business debtor, see  |               | No.                |  | n filing under Chapte<br>Bankruptcy Code. | r 11, but I                 | am NOT a s                   | small busines                   | s debtor a               | according to the definit  | tion in |
|         | 11 U.S.C. § 101(51D).   |               | Yes.               |  | n filing under Chapte<br>nkruptcy Code.   | r 11 and I                  | am a small                   | business deb                    | otor accord              | ding to the definition in   | the     |
| Pa      | Report If You Ow  | n o           | r Hav              | e Ar   | ny Hazardous Pi                           | roperty o                   | or Any Pr                    | operty Th                       | at Need                  | s Immediate Atte  | ntion   |
| 14.     | Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or |               | No<br>Yes.         | Wh   | at is the hazard?                         |                             |                              |                                 |                          |   |         |
|         | safety? Or do you own any property that needs immediate attention?  |               |                    | If in  | nmediate attention is                     | needed, v                   | why is it nee                | eded?                           |                          |   |         |
|         | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?                 |               |                    | Wh   | ere is the property?                      | Number                      | Street                       |                                 |                          |   |         |

City

State

ZIP Code

## Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

**About Debtor 1:** 

| Vali | muct | chack | one |
|------|------|-------|-----|

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| ☐ I am not re | quired to re | eceive a | briefing | about |
|---------------|--------------|----------|----------|-------|
| credit cour   |              |          |          |       |

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| ı | l am | not | requi | ired | to | rece | ive | а | bri | efi | ng | al | oout |
|---|------|-----|-------|------|----|------|-----|---|-----|-----|----|----|------|
|   |      |     | unse  |      |    |      |     |   |     |     |    |    |      |

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 16-01078 c. Doc 1 Filed 01/14/16 Entered 01/14/16 11:21:27 First Name Middle Name Doctument Page 6 of 37 number (if known) Desc Main Debtor 1 Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do you 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) have? as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17.  $\square$ Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. State the type of debts you owe that are not consumer or business debts. 16c. 17. Are you filing under Chapter 7? I am not filing under Chapter 7. Go to line 18. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and Do you estimate that after Yes. administrative expenses are paid that funds will be available to distribute to unsecured creditors? any exempt property is excluded and  $\square$ administrative expenses are paid that funds will be Yes available for distribution to unsecured creditors? 18. How many creditors do 1-49 1,000-5,000 25,001-50,000 you estimate that you 50-99 5,001-10,000 50,001-100,000 owe? 100-199 10,001-25,000 More than 100,000 200-999 19. How much do you \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion  $\square$ estimate your assets to \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion be worth? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion П П \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion 20. How much do you \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion estimate your liabilities to \$1,000,000,001-\$10 billion \$50,001-\$100,000 \$10,000,001-\$50 million П П be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion  $\overline{\mathbf{M}}$ \$100,000,001-\$500 million \$500,001-\$1 million More than \$50 billion П П Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is an attorney to help me fill

For you

out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| X /s/ Kenneth C. Tripp        | X                     |
|-------------------------------|-----------------------|
| Signature of Debtor 1         | Signature of Debtor 2 |
| Executed on <b>01/14/2016</b> | Executed on           |
| MM / DD / YYYY                | MM / DD / YYYY        |

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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Robert J. Adams & Associates                 | Date          | 01/14/2016     |  |
|--|---------------|----------------|--|
| Signature of Attorney for Debtor                 |               | MM / DD / YYYY |  |
| Robert J. Adams & Associates Printed name        |               |                |  |
| Robert J Adams & Associates                      |               |                |  |
| Firm Name  |               |                |  |
| 901 W Jackson Suite 202                          |               |                |  |
| Number Street                                    |               |                |  |
|  |               |                |  |
|  |               |                |  |
|  |               |                |  |
| Chicago  | IL            | 60607          |  |
| City   | State         | ZIP Code       |  |
| •  |               |                |  |
|  | 22            |                |  |
| (0.10) 0.10 0.10                                 |               |                |  |
| Contact phone (312) 346-0100                     | Email address |                |  |
| -  |               |                |  |
| Contact phone (312) 346-0100  0013056 Bar number |               |                |  |

|   |   | Do   | cument Page 8 of   | <b>₌</b> 57  |                                       |
|---|---|--|--|--|---------------------------------------|
| Fill in this ir                                 | nformation to id  | lentify your case  | and this filing:   |  |                                       |
| Debtor 1  | Kenneth   | C.   | Tripp  |  |                                       |
|   | First Name  | Middle Name  | Last Name  |  |                                       |
| Debtor 2  |   |  |  |  |                                       |
| (Spouse, if filing                              | g) First Name   | Middle Name  | Last Name  |  |                                       |
| United States B                                 | Bankruptcy Court for  | the: NORTHERN [  | DISTRICT OF ILLINOIS   |  |                                       |
| Case number (if known)                          |   |  |  | Check if amende  | this is an<br>d filing                |
|   |   |  |  | 1  |                                       |
| Official Forr                                   | m 106A/B  |  |  |  |                                       |
| Schedule A                                      | A/B: Property   | •  |  |  | 12/15                                 |
| filing together, be sheet to this for Part 1: D | ooth are equally res<br>m. On the top of an<br>escribe Each R | sponsible for supply<br>ny additional pages,<br>esidence, Buildi | ring correct information. If mo<br>write your name and case nu                       | is possible. If two married peo<br>ire space is needed, attach a si<br>mber (if known). Answer ever<br>Estate You Own or Have<br>and, or similar property? | eparate<br>y question.                |
|   | o to Part 2.<br>Vhere is the property                         | /?   |  |  |                                       |
| 1.1.<br><b>2521 E. 96th S</b>                   | t., Chicago, IL 60  | 617 Check all  | he property?<br>that apply.<br>e-family home   | Do not deduct secured claim<br>amount of any secured claim<br>Creditors Who Have Claims  | ns on <i>Schedule D:</i>              |
| Single Family 2521 E. 96th S                    | Residence<br>t., Chicago, IL 60                               | —  | ex or multi-unit building<br>Iominium or cooperative                                 | Current value of the entire property?  | Current value of the portion you own? |
| debtor inherite                                 | ed house from<br>In June 2014; FM                             | Manu   | ufactured or mobile home   | \$25,000.00  | \$25,000.00                           |
| from an appra                                   | isal from June 20   | 114 Inves  | stment property<br>share   | Describe the nature of you interest (such as fee simpl entireties, or a life estate),  | e, tenancy by the                     |
| Cook<br>County                                  |   | П опе  |  | _  |                                       |
| County  |   | Who has<br>Check or  | an interest in the property?   | Fee simple   |                                       |
|   |   | ☑ Debte ☐ Debte  | or 1 only<br>or 2 only<br>or 1 and Debtor 2 only<br>ast one of the debtors and anoth | Check if this is commu (see instructions)  | inity property                        |
|   |   |  | ormation you wish to add abo identification number:                                  | ut this item, such as local  | _                                     |
|   | •   | •  | of your entries from Part 1, in rite that number here                                | _  | \$25,000.00                           |
| Part 2: D                                       | escribe Your Vo   | ehicles  |  | _  |                                       |
|   |   |  |  |  |                                       |
| -   |   | •  |  | are registered or not? Include Executory Contracts and Unexp   | •                                     |
| 3. Cars, vans,                                  | , trucks, tractors, s   | port utility vehicles,   | motorcycles  |  |                                       |
| □ No<br>✓ Yes                                   |   |  |  |  |                                       |

| Deb | tor 1 Kennet                                  |                                   | Doc 1           | Filed 01/14/16<br>Document   |                             | /14/16 11:21:27<br>7 number (if known)  | Desc Main  |
|-----|---|-----------------------------------|-----------------|--|-----------------------------|---|--|
| Oth | te:<br>del:                                   | Volkwagor<br>CC<br>2012<br>68,300 |                 | Last Name  Who has an interest in the Check one.  ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 ☐ At least one of the de   | 2 only<br>btors and another | Do not deduct secured claumount of any secured claumount of the Creditors Who Have Claim Current value of the entire property?  \$11,500.00 |  |
| 4.  |   |                                   |                 | (see instructions)  and other recreational velocities in the second sec |                             |   |  |
| 5.  |   | -                                 | -               | wn for all of your entries<br>Part 2.  Write that numbe  |                             | - ·   | \$11,500.00  |
| P   | art 3: Desci                                  | rihe Your F                       | Personal a      | and Household Items  | 2                           |   |  |
|     |   |                                   |                 | erest in any of the follow   |                             |   | Current value of the portion you own?  Do not deduct secured claims or exemptions. |
| 6.  | Household good Examples: Major No             |                                   | _               | ns, china, kitchenware   |                             |   |  |
|     | Yes. Describ                                  | e Six ro                          | oms of furr     | niture of various ages   |                             |   | \$500.00   |
| 7.  | music   |                                   |                 | video, stereo, and digital e   |                             | •   |  |
|     | ☐ No<br>☑ Yes. Describ                        | oe 3 TV's                         | , Bose Sys      | tem, Laptop, Ipad min  | i, Amazon Kindl             | le  | \$500.00   |
| 8.  |   | ues and figuri                    |                 | s, prints, or other artwork;<br>ollections; other collections  | •                           | · ·   |  |
|     | ✓ No  Yes. Describ                            | De                                |                 |  |                             |   |  |
| 9.  |   | s, photograph                     | ic, exercise,   | and other hobby equipme ools; musical instruments  | ent; bicycles, pool ta      | ables, golf clubs, skis;  |  |
|     | <ul><li>✓ No</li><li>✓ Yes. Describ</li></ul> | De                                |                 |  |                             |   |  |
| 10. | •   | ls, rifles, shotç                 | guns, ammur     | nition, and related equipme  | ent                         |   |  |
|     | ✓ No  Yes. Describ                            | oe                                |                 |  |                             |   |  |
| 11. |   | /day clothes, f                   | furs, leather o | coats, designer wear, sho  | es, accessories             |   |  |
|     | ✓ No  ☐ Yes. Describ                          | oe                                |                 |  |                             |   |  |

| Deb | Case 16-01078 Doc 1 Filed 01/14/16 Entered 01/14/16 11:21:27 tor 1 Kenneth C. DOTUMPNENT Page 10 @fase/humber (if known)  First Name Middle Name Last Name   |   |
|-----|--|---|
| 12. | Jewelry  Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver   |   |
|     | Yes. Describe Ring, Watch, assorted other jewelry  | \$150.00  |
| 13. | Non-farm animals  Examples: Dogs, cats, birds, horses  |   |
|     | ✓ No  Yes. Describe  |   |
| 14. | Any other personal and household items you did not already list, including any health aids you did not list  |   |
|     | ✓ No  Yes. Give specific information   |   |
| 15. | Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write the number here   | \$1,150.00  |
| Pa  | art 4: Describe Your Financial Assets  |   |
| Doy | you own or have any legal or equitable interest in any of the following?   | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. | Cash  Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition  |   |
|     | □ No ☑ Yes   | \$150.00  |
| 17. | Deposits of money  Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. |   |
|     | No Yes Institution name:   |   |
|     | 17.1. Checking account: Fifth Third Bank   | \$430.00  |
|     | 17.2. Other financial account: Early Access Account  | \$500.00  |
| 18. | Bonds, mutual funds, or publicly traded stocks  Examples: Bond funds, investment accounts with brokerage firms, money market accounts  |   |
|     | ✓ No  Yes Institution or issuer name:  |   |
|     |  |   |
|     |  |   |

| Deb | tor 1        | Case 16-0107<br>Kenneth  | C.                             | Filed 01/14/16<br>Doownent                        | Entered 01/14/16 11:21:27 Page 11 @fa57humber (if known)                                     |             |
|-----|--------------|--|--------------------------------|---|--|-------------|
| 19. | Non-         | First Name -publicly traded stock  | Middle Name c and interests in | Last Name incorporated and unit                   | ncorporated businesses, including  |             |
|     | an ir<br>☑ ¹ | nterest in an LLC, par<br>No<br>Yes. Give specific<br>nformation about<br>them |                                |   | % of ownership:  |             |
| 20. | Neg          | otiable instruments incl   | lude personal che              | cks, cashiers' checks, p                          | negotiable instruments promissory notes, and money orders. ne by signing or delivering them. |             |
|     |              | No Yes. Give specific nformation about hem                                     | Issuer name:                   |   |  | _           |
| 21. | Exar         | rement or pension ac<br>nples: Interests in IRA<br>profit-sharing pl           | , ERISA, Keogh,                | 401(k), 403(b), thrift sav                        | rings accounts, or other pension or  |             |
|     |              | Yes. List each account separately.   | Type of account:               | Institution name:                                 |  |             |
|     |              |  | Pension plan:                  | Pension throug                                    | jh job (Defined Benefits)  | Unknown     |
| 22. | Your<br>Exar | mples: Agreements wit<br>panies, or others                                     | eposits you have r             |   | ontinue service or use from a company<br>electric, gas, water), telecommunications           |             |
| 22  | _            | Yes  | a anacifia nariadia            | Institution name or inc                           |  |             |
| 23. | ☑ I          | •  |                                |   | ou, either for life or for a number of years)  |             |
|     |              |  |                                |   |  |             |
| 24. |              | .S.C. §§ 530(b)(1), 529  |                                |   | program, or under a qualified state tuition p  | orogram.    |
|     |              |  | Institution name               | and description. Separ                            | rately file the records of any interests. 11 U.S.  | C. § 521(c) |
|     |              |  |                                |   |  |             |
| 25. |              | •  | •                              | perty (other than anytl                           | hing listed in line 1), and rights or  |             |
|     |              | ers exercisable for yo<br>No<br>Yes. Give specific<br>nformation about them    |                                |   |  |             |
| 26. |              |  |                                | crets, and other intelled, proceeds from royaltie | ctual property;<br>es and licensing agreements   |             |
|     |              | No<br>Yes. Give specific<br>nformation about them                              | 1                              |   |  |             |

| Deb | tor 1    |   | C.                                   | Filed 01/14/16<br>Dooimnent | Entered 01/14/16 11:21<br>Page 12 @asp. Thumber (if known)          |             | Desc Main   |
|-----|----------|---|--------------------------------------|-----------------------------|---|-------------|---|
| 27  | Lion     |   | Middle Name                          | Last Name                   |   |             |   |
| 21. | Exar     | No  | -                                    | _                           | ation holdings, liquor licenses, profession                         | onal licen  | ses   |
|     |          | Yes. Give specific nformation about them                          |                                      |                             |   |             |   |
| Mon | ney oı   | property owed to you?   |                                      |                             |   |             | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax      | refunds owed to you   |                                      |                             |   |             |   |
|     | <u> </u> | No<br>Yes. Give specific informa                                  | ation                                |                             |   | Federa      | l: <b>\$0.00</b>  |
|     | <b>–</b> | about them, including whe   | ther                                 |                             |   | State:      | \$0.00  |
|     |          | you already filed the returr<br>and the tax years                 |                                      |                             |   | Local:      | \$0.00  |
| 29. | Fam      | ily support   |                                      |                             |   |             |   |
|     | Exar     | mples: Past due or lump s   | um alimony, s                        | pousal support, child su    | pport, maintenance, divorce settlement                              | i, property | y settlement  |
|     |          | งo<br>Yes. Give specific informa                                  | ation                                |                             | Alimony:  |             | \$0.00  |
|     |          |   |                                      |                             | Maintenan   | ıce:        | \$0.00  |
|     |          |   |                                      |                             | Support:  |             | \$0.00  |
|     |          |   |                                      |                             | Divorce se  | ettlement   | <b>\$0.00</b>   |
|     |          |   |                                      |                             | Property s  | ettlemen    | t: <b>\$0.00</b>  |
| 30. | Exar     |   | ability insurand<br>cial Security be |                             | penefits, sick pay, vacation pay, workers<br>u made to someone else | ş'          |   |
| 31. |          | rests in insurance policion mples: Health, disability, o          |                                      | e; health savings accou     | nt (HSA); credit, homeowner's, or rente                             | r's insura  | nce   |
|     | ب        | No  |                                      |                             | <b>5</b> . 4.1  |             |   |
|     | _ ,      | Yes. Name the insurance company of each policy and list its value | Company r                            | name:                       | Beneficiary:  |             | urrender or refund value:   |
|     |          |   |                                      |                             |   |             |   |
| 32. | If you   | ed to receive property bed  | iving trust, exp                     | pect proceeds from a life   | died e insurance policy, or are currently                           |             |   |
|     |          | No<br>Yes. Give specific informa                                  | ation                                |                             |   |             |   |
| 33. |          | ms against third parties, mples: Accidents, employe               |                                      | •                           | suit or made a demand for payment ghts to sue                       |             |   |
|     |          | No<br>Yes. Describe each claim                                    |                                      |                             |   |             |   |
| 34. |          | er contingent and unliqui   | dated claims                         | of every nature, includ     | ling counterclaims of the debtor and                                |             |   |
|     | ب        | No<br>Yes. Describe each claim                                    |                                      |                             |   |             |   |

| Deb | Case 16-01078 Doc 1 Filed 01/14/16 Entered 01/14/16  total Kenneth C. Doorignment Page 13 of First Name Middle Name Last Name  |                 |  |
|-----|--|-----------------|--|
| 35. | Any financial assets you did not already list  |                 |  |
|     | <ul><li>✓ No</li><li>✓ Yes. Give specific information</li></ul>  |                 |  |
| 36. | Add the dollar value of all of your entries from Part 4, including any entries for pages you hattached for Part 4. Write that number here                                    |                 | \$1,080.00   |
| Pa  | art 5: Describe Any Business-Related Property You Own or Have an Intere  | st In. List any | real estate in Part 1.   |
| 37. | Do you own or have any legal or equitable interest in any business-related property?   |                 |  |
|     | No. Go to Part 6.  Yes. Go to line 38.   |                 |  |
|     |  |                 | Current value of the portion you own?  Do not deduct secured claims or exemptions. |
| 38. | Accounts receivable or commissions you already earned  |                 |  |
|     | ✓ No ☐ Yes. Describe   |                 |  |
| 39. | Office equipment, furnishings, and supplies  Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs desks, chairs, electronic devices | s, telephones,  |  |
|     | <ul><li>№ No</li><li>Yes. Describe</li></ul>   |                 |  |
| 40. | Machinery, fixtures, equipment, supplies you use in business, and tools of your trade  |                 |  |
|     | ✓ No ☐ Yes. Describe   |                 |  |
| 41. | Inventory  |                 |  |
|     | ✓ No  Yes. Describe  |                 |  |
| 42. | Interests in partnerships or joint ventures  |                 |  |
|     | ✓ No ☐ Yes. Describe Name of entity:   | % of ownership: |  |
|     |  |                 |  |
|     |  |                 |  |
| 43. | Customer lists, mailing lists, or other compilations   |                 |  |
|     | <ul> <li>No</li> <li>Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. §</li> <li>No</li> <li>Yes. Describe</li> </ul>                 | 101(41A))?      |  |

| Deb | tor 1 Case 16-01  Kenneth First Name | 1078 Doc 1<br>c.         | Filed 01/14/16<br><u>Doouppent</u><br>Last Name | Entered 01/14/16 11:21:27 Page 14 @fa5p7humber (if known) |  |
|-----|--------------------------------------|--------------------------|---|---|--|
| 44. | Any business-related                 | property you did no      | t already list                                  |   |  |
|     | ✓ No  Yes. Give specific information |                          |   |   |  |
| 45. | Add the dollar value of              | of all of your entries   | from Part 5, including                          | any entries for pages you have                            |  |
|     |                                      |                          | _   | ······································                    | \$0.00   |
| Pa  |                                      |                          | mmercial Fishing-l<br>in farmland, list it in   | Related Property You Own or Have<br>Part 1.               | an Interest In.  |
| 46. | Do you own or have a                 | any legal or equitable   | e interest in any farm-                         | or commercial fishing-related property?                   |  |
|     | No. Go to Part 7. Yes. Go to line 47 | <b>.</b>                 |   |   |  |
|     |                                      |                          |   |   | Current value of the portion you own?  Do not deduct secured claims or exemptions. |
| 47. | Farm animals  Examples: Livestock,   | poultry, farm-raised fis | sh  |   |  |
|     | ✓ No ☐ Yes                           |                          |   |   |  |
| 48. | Cropseither growing                  | g or harvested           |   |   |  |
|     | No ☐ Yes. Give specific information  |                          |   |   |  |
| 49. | Farm and fishing equ                 | ipment, implements,      | machinery, fixtures, a                          | nd tools of trade   |  |
|     | ✓ No<br>Yes                          |                          |   |   |  |
| 50. | Farm and fishing sup                 | plies, chemicals, and    | d feed  |   |  |
|     | ✓ No ☐ Yes                           |                          |   |   |  |
| 51. | Any farm- and commo                  | ercial fishing-related   | property you did not a                          | already list  |  |
|     | No Yes. Give specific information    |                          |   |   |  |
| 52. |                                      |                          |   | any entries for pages you have                            | \$0.00   |

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Debtor 1

Kenneth

C.

Doouppent

63. Total of all property on Schedule A/B. Add line 55 + line 62.....

Page 15 of 5-7 number (if known)

\$38,730.00

First Name Middle Name

| Pa  | Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above                             |                |                              |          |   |             |  |  |  |
|-----|--|----------------|------------------------------|----------|---|-------------|--|--|--|
| 53. | Do you have other property of any kind you did not already list<br>Examples: Season tickets, country club membership | ?              |                              |          |   |             |  |  |  |
|     | ✓ No  Yes. Give specific information   |                |                              |          | _ |             |  |  |  |
| 54. | Add the dollar value of all of your entries from Part 7. Write that  | at number here |                              | →        |   | \$0.00      |  |  |  |
| P   | art 8: List the Totals of Each Part of this Form   |                |                              |          |   |             |  |  |  |
| 55. | Part 1: Total real estate, line 2  |                |                              | →        |   | \$25,000.00 |  |  |  |
| 56. | Part 2: Total vehicles, line 5   | \$11,500.00    |                              |          |   |             |  |  |  |
| 57. | Part 3: Total personal and household items, line 15  | \$1,150.00     |                              |          |   |             |  |  |  |
| 58. | Part 4: Total financial assets, line 36  | \$1,080.00     |                              |          |   |             |  |  |  |
| 59. | Part 5: Total business-related property, line 45   | \$0.00         |                              |          |   |             |  |  |  |
| 60. | Part 6: Total farm- and fishing-related property, line 52  | \$0.00         |                              |          |   |             |  |  |  |
| 61. | Part 7: Total other property not listed, line 54   | . \$0.00       |                              |          |   |             |  |  |  |
| 62. | Total personal property. Add lines 56 through 61   | \$13,730.00    | Copy personal property total | <b>→</b> | + | \$13,730.00 |  |  |  |

| Case                   | 10-01078          |                  | u U1/14/16<br>Cument | Page 16 of | 11/14/10 11<br>57 |    | Desc Mail         |
|------------------------|-------------------|------------------|----------------------|------------|-------------------|----|-------------------|
| Fill in this inf       | ormation to i     | dentify your cas | e:                   |            | 0.                |    |                   |
| Debtor 1               | Kenneth           | C.               | Tripp                |            |                   |    |                   |
| Debtor 2               | First Name        | Middle Name      | Last Name            |            |                   |    |                   |
| (Spouse, if filing)    |                   | Middle Name      | Last Name            |            |                   |    |                   |
| United States Bai      | nkruptcy Court fo | r the: NORTHERN  | DISTRICTOFI          | LINOIS     |                   | _  | eck if this is an |
| Case number (if known) | -                 |                  |                      |            |                   | am | nended filing     |
|                        |                   |                  |                      |            |                   |    |                   |
| Official Form          | 1060              |                  |                      |            |                   |    |                   |
|                        |                   |                  | <b></b>              | 4          |                   |    |                   |
| Schedule C:            | : The Prope       | erty You Clair   | n as ∟xemp           | T          |                   |    |                   |

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions--such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: Identify the Property You Cla   | aim as Exempt                        |   |                                    |  |  |  |  |  |
|---|--------------------------------------|---|------------------------------------|--|--|--|--|--|
| Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.  You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) |                                      |   |                                    |  |  |  |  |  |
| 2. For any property you list on Schedule A/B th   | nat you claim as exen                | npt, fill in the information b  | pelow.                             |  |  |  |  |  |
| Brief description of the property and line on<br>Schedule A/B that lists this property  | Current value of the portion you own | Amount of the exemption you claim   | Specific laws that allow exemption |  |  |  |  |  |
|   | Copy the value from Schedule A/B     | Check only one box for each exemption                                       |                                    |  |  |  |  |  |
| Brief description Single Family Residence 2521 E. 96th St., Chicago, IL 60617; debtor inherited house from grandmother in June 2014; FMV is from an appraisal from June 2014 Line from Schedule A/B:  | \$25,000.00                          | \$8,450.00  100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-901 & 902            |  |  |  |  |  |

| 3. | you claiming a homestead exemption of more than \$155,675?  Diject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.) |
|----|---|
|    | No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?  No Yes   |

12/15

Debtor 1

C. Kenneth First Name Middle Name

Last Name

Page 17 of 57
Case number (if known)

Part 2: Additional Page

| Brief description of the property and line on<br>Schedule A/B that lists this property           | Current value of the portion you own | ount of the<br>mption you claim  | Specific laws that allow exemption |
|--|--------------------------------------|--|------------------------------------|
|  | Copy the value from<br>Schedule A/B  | eck only one box for<br>h exemption  |                                    |
| Brief description  2012 Volkswagon CC  Line from Schedule A/B:                                   | \$11,500.00                          | \$0.00<br>100% of fair market<br>value, up to any<br>applicable statutory<br>limit   | 735 ILCS 5/12-1001(c)              |
| Brief description Six rooms of furniture of various ages Line from Schedule A/B:6                | \$500.00                             | \$500.00<br>100% of fair market<br>value, up to any<br>applicable statutory<br>limit | 735 ILCS 5/12-1001(b)              |
| Brief description 3 TV's, Bose System, Laptop, Ipad mini, Amazon Kindle Line from Schedule A/B:7 | \$500.00                             | \$500.00<br>100% of fair market<br>value, up to any<br>applicable statutory<br>limit | 735 ILCS 5/12-1001(b)              |
| Brief description  Cash  Line from Schedule A/B:16   | \$150.00                             | \$150.00<br>100% of fair market<br>value, up to any<br>applicable statutory<br>limit | 735 ILCS 5/12-1001(b)              |
| Brief description  Fifth Third Bank  Line from Schedule A/B:17.1                                 | \$430.00                             | \$430.00<br>100% of fair market<br>value, up to any<br>applicable statutory<br>limit | 735 ILCS 5/12-1001(b)              |
| Brief description  Early Access Account  Line from Schedule A/B:                                 | \$500.00                             | \$500.00<br>100% of fair market<br>value, up to any<br>applicable statutory<br>limit | 735 ILCS 5/12-1001(b)              |
| Brief description  Pension through job (Defined Benefits)  Line from Schedule A/B:21             | Unknown                              | \$0.00<br>100% of fair market<br>value, up to any<br>applicable statutory<br>limit   | 735 ILCS 5/12-1006                 |

| Case                                | 10-01019 D  | _                      |                          | 18 of 57                           | .1.21.27 Desc                                     | Main              |
|-------------------------------------|---|------------------------|--------------------------|------------------------------------|---|-------------------|
| Fill in this info                   | ormation to iden                                      |                        | imeni Pane               | 18.0 57                            |   |                   |
|                                     |   |                        |                          |                                    |   |                   |
| Debtor 1                            | Kenneth<br>First Name                                 | C. Middle Name         | Tripp  Last Name         |                                    |   |                   |
|                                     | T iist Name   | Middle Name            | Lastivanie               |                                    |   |                   |
| Debtor 2<br>(Spouse, if filing)     | First Name  | Middle Name            | Last Name                |                                    |   |                   |
| (Spouse, ii iiiiig)                 | riist Name  | Middle Name            | Last Name                |                                    |   |                   |
| United States Bar                   | nkruptcy Court for the                                | : NORTHERN DI          | STRICT OF ILLINOIS       | S                                  |   |                   |
| Case number                         |   |                        |                          |                                    |   |                   |
| (if known)                          |   |                        |                          |                                    | Check if this is                                  |                   |
|                                     |   |                        |                          |                                    | amended filing                                    | J                 |
|                                     |   |                        |                          |                                    |   |                   |
| Official Form                       | 106D  |                        |                          |                                    |   |                   |
| Schedule D:                         | Craditors Wh  | oo Haye Clair          | ms Secured by            | Property                           |   | 12/15             |
| ochedale D.                         | Orcaliors Wi  | io nave oran           | ins occured by           | rioperty                           |   | 12/13             |
| correct informatio                  | n. If more space is                                   | needed, copy the A     |                          | out, number the entri              | y responsible for sup<br>es, and attach it to thi |                   |
| 1. Do any credit                    | ors have claims sec                                   | ured by your prop      | erty?                    |                                    |   |                   |
| ☐ No. Che                           | ck this box and subm                                  | it this form to the co | urt with your other sche | edules. You have noth              | ning else to report on th                         | is form.          |
| <b>-</b>                            | in all of the information                             |                        | ·                        |                                    |   |                   |
|                                     |   |                        |                          |                                    |   |                   |
| Part 1: List                        | t All Secured Cla                                     | aims                   |                          |                                    |   |                   |
|                                     |   |                        |                          |                                    |   |                   |
|                                     | ed claims. If a credit                                |                        |                          |                                    |   |                   |
|                                     | creditor separately for                               |                        |                          | Column A                           | Column B  | Column C          |
|                                     | particular claim, list tl<br>ible, list the claims in |                        |                          | Amount of claim  Do not deduct the | Value of collateral                               | Unsecured portion |
| creditor's nam                      |   | dipridaction order t   | locording to the         | value of collateral                | that supports this claim                          | If any            |
|                                     |   | B the state of         |                          | raido di conatoral                 |   | ,                 |
| 2.1                                 |   | Describe the page 2    |                          | \$16,550.00                        | \$25,000.00                                       |                   |
| First Midwest Ba                    | ank   | — Single Famil         |                          |                                    |   |                   |
| Creditor's name<br>300 North Hunt ( | Club Bood   | — Siligle i allili     | y Home                   |                                    |   |                   |
| Number Street                       | Club Roau   |                        |                          |                                    |   |                   |
|                                     |   |                        |                          |                                    |   |                   |
| Gurnee                              | IL 60031  | As of the date         | you file, the claim is:  | Check all that apply.              |   |                   |
| City                                | State ZIP Code  | Contingen              | t                        |                                    |   |                   |
|                                     | . Chaolann  | Unliquidate            | ed                       |                                    |   |                   |
| Who owes the deb                    | ot? Check one.  | Disputed               |                          |                                    |   |                   |
| Debtor 1 only Debtor 2 only         |   | Mature of lien         | Check all that apply.    |                                    |   |                   |
| ㅡ                                   | ehtor 2 only  |                        | nent you made (such as   | s mortagae or secured              | car loan)   |                   |
| _                                   | the debtors and anot                                  | _                      | en (such as tax lien, m  |                                    | our loan,   |                   |
| L / 11 10 20 1 0 1 0 1              | dobtoro ana anot                                      | _                      | lien from a lawsuit      | 20                                 |   |                   |
| ☐ Check if this c                   | laim relates  | _                      | uding a right to offset) | Second Mortgage                    |   |                   |
| to a communit                       |   | <b>F</b> 2 (1101       |                          | Occord Mortgage                    |   |                   |
| Date debt was inc                   | urred   | Last 4 digita a        | f account number         | 5 1 0 0                            |   |                   |
| Jake Debi Was INC                   | uncu  | Last 4 ului(S 0        | a account fillinger      | ., , , , , , , ,                   |   |                   |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$16,550.00

Entered 01/14/16 11:21:27 Case 16-01078 Doc 1 Filed 01/14/16 Desc Main

Debtor 1

Kenneth Doouppent First Name Middle Name

After listing any entries on this page, number them

Page 19 @fa5e7number (if known)

Part 1:

sequentially from the previous page.

**Additional Page** 

Last Name

Column A Amount of claim Do not deduct the value of collateral Column B Value of collateral that supports this claim

Column C Unsecured portion If any

| Santander Consumer USA Creditor's name PO Box 961245 Number Street  | Describe the property that secures the claim: 2012 Volskwagen CC         | \$24,749.00           | \$11,500.00 | \$13,249.00 |
|---|--|-----------------------|-------------|-------------|
| FT Worth TX 76161 City State ZIP Code  Who owes the debt? Check one.  | As of the date you file, the claim is:  Contingent Unliquidated Disputed | Check all that apply. |             |             |
| <ul> <li>☑ Debtor 1 only</li> <li>☑ Debtor 2 only</li> <li>☑ Debtor 1 and Debtor 2 only</li> <li>☑ At least one of the debtors and another</li> </ul> | Nature of lien. Check all that apply.  An agreement you made (such as    | • •                   | oan)        |             |
| Check if this claim relates to a community debt   | Judgment lien from a lawsuit Other (including a right to offset)         | Car loan              | _           |             |
| Date debt was incurred  | Last 4 digits of account number  | 3 4 5 9               |             |             |

Add the dollar value of your entries in Column A on this page. Write that number here:

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$24,749.00

\$41,299.00

Fill in this information to identify your case: Kenneth C. Debtor 1 Tripp Middle Name First Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: **NORTHERN DISTRICT OF ILLINOIS** Case number ☐ Check if this is an (if known) amended filing

## Official Form 106E/F

## Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

### Part 1: List All of Your PRIORITY Unsecured Claims

| 1. | Do any | creditors have | ve priority | unsecured | claims | against you | u? |
|----|--------|----------------|-------------|-----------|--------|-------------|----|
|----|--------|----------------|-------------|-----------|--------|-------------|----|

No. Go to Part 2.

☐ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.

Total claim Priority Nonpriority amount amount

Case 16-01078 Doc 1 Filed 01/14/16 Entered 01/14/16 11:21:27 Desc Main Page 21 of 57 Case number (if known) Document Debtor 1 Kenneth First Name Middle Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with you other schedules.  $\square$ List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If more space is needed for nonpriority unsecured claims, fill out the Continuation Page of Part 2. Total claim 4.1 \$78.59 AFNI Last 4 digits of account number 9 9 0 1 Nonpriority Creditor's Name When was the debt incurred? PO Box 3517 As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated **Bloomington** IL 61702-3517 Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only П Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt Other. Specify Collecting for - Country Mutual Insu Is the claim subject to offset? **☑** No Yes 4.2 \$2,343.08 Americash Loans, LLC Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 105 W. Madison As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated 60602 Chicago ☐ Disputed State ZIP Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only ☐ Student loans Debtor 2 only П Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts

Check if this claim is for a community debt

Is the claim subject to offset?

✓ No ☐ Yes Other. Specify Loan

Debtor 1

Kenneth

C.

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First Name Middle Name Last Name

| Part 2: Your NONPRIORITY Unsecu   | red Claims Continuation Page  |             |
|---|---|-------------|
| After listing any entries on this page, number the previous page.             | m sequentially from the   | Total claim |
| 4.3   |   | \$10,000.00 |
| Carmel Financial Corporation, Inc   | Last 4 digits of account number   |             |
| Nonpriority Creditor's Name 101 E Carmel Dr # 200                             | When was the debt incurred?   |             |
| Number Street   | As of the date you file, the claim is: Check all that apply.  |             |
|   | _ ☐ Contingent  |             |
| Commod IN 40000   | Unliquidated  |             |
| Carmel         IN         46032           City         State         ZIP Code | _ Disputed  |             |
| Who incurred the debt? Check one.   | T (NONDRIGHTY )   |             |
| ✓ Debtor 1 only   | Type of NONPRIORITY unsecured claim:  |             |
| Debtor 2 only   | Student loans   |             |
| Debtor 1 and Debtor 2 only  | <ul> <li>Obligations arising out of a separation agreement or divorce<br/>that you did not report as priority claims</li> </ul> |             |
| At least one of the debtors and another                                       | Debts to pension or profit-sharing plans, and other similar debts   |             |
| ☐ Check if this claim is for a community debt                                 | Other. Specify Other  |             |
| Is the claim subject to offset?   | V sales speed Calci   |             |
| ✓ No  |   |             |
| Yes   |   |             |
|   |   |             |
| 4.4   |   | \$14,196.10 |
| Charter One   | Last 4 digits of account number 3 1 5 3   |             |
| Nonpriority Creditor's Name   | When was the debt incurred?   |             |
| Customer Service Center   |   |             |
| Number Street PO Box 42001  | As of the date you file, the claim is: Check all that apply.  |             |
| 1 O BOX 42001   | ☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent   |             |
| Providence RI 02940   | — ☐ Disputed  |             |
| City State ZIP Code   |   |             |
| Who incurred the debt? Check one.   | Type of NONPRIORITY unsecured claim:  |             |
| Debtor 1 only  Debtor 2 only  | Student loans   |             |
| Debtor 2 only Debtor 1 and Debtor 2 only                                      | Obligations arising out of a separation agreement or divorce  |             |
| At least one of the debtors and another                                       | that you did not report as priority claims  |             |
|   | Debts to pension or profit-sharing plans, and other similar debts   |             |
|   | Other. Specify bank fees  |             |
| Is the claim subject to offset?   |   |             |
| ☑ No<br>□ Yes   |   |             |
|   |   |             |
| 4.5   |   | \$359.08    |
| LI<br>City of Chicago   | Last 4 digits of account number 1 0 4 4   | Ψ333.00     |
| Nonpriority Creditor's Name   | _ <u> </u>  |             |
| Department of Water Management  | When was the debt incurred?   |             |
| Number Street   | As of the date you file, the claim is: Check all that apply.  |             |
| P.O Box 6330  | _ Contingent  |             |
| Chicago IL 60680  | Unliquidated  |             |
| City State ZIP Code   | — ☐ Disputed  |             |
| Who incurred the debt? Check one.   | Type of NONPRIORITY unsecured claim:  |             |
| Debtor 1 only   | Student loans   |             |
| Debtor 2 only   | ☐ Obligations arising out of a separation agreement or divorce  |             |
| Debtor 1 and Debtor 2 only  At least one of the debtors and another           | that you did not report as priority claims  |             |
|   | Debts to pension or profit-sharing plans, and other similar debts   |             |
| Check if this claim is for a community debt                                   | ☑ Other. Specify <b>Utility</b>   |             |
| Is the claim subject to offset?   |   |             |
| ☑ No  |   |             |
| Yes   |   |             |

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Debtor 1

Kenneth

C.

First Name Middle Name

Last Name

| Part 2: Your NONPRIORITY Unsecure                                   | ed Claims Continuation Page                                       |             |
|---|---|-------------|
| After listing any entries on this page, number them previous page.  | n sequentially from the   | Total claim |
| 4.6   |   | \$200.00    |
| City of Country Club Hills  | Last 4 digits of account number                                   | 4200.00     |
| Nonpriority Creditor's Name   | When was the debt incurred?                                       |             |
| 4200 W. 183rd St. Number Street                                     | As of the date you file, the claim is: Check all that apply.      |             |
| Number Sueet  | Contingent  |             |
| Country Club Hills II 60479   | Unliquidated  |             |
| Country Club Hills IL 60478 City State ZIP Code                     | Disputed  |             |
| Who incurred the debt? Check one.                                   | Type of NONPRIORITY unsecured claim:                              |             |
| Debtor 1 only   | Student loans   |             |
| Debtor 2 only   | Obligations arising out of a separation agreement or divorce      |             |
| Debtor 1 and Debtor 2 only  At least one of the debtors and another | that you did not report as priority claims                        |             |
| Check if this claim is for a community debt                         | Debts to pension or profit-sharing plans, and other similar debts |             |
| <u> </u>  | ✓ Other. Specify Tickets  |             |
| Is the claim subject to offset?  No                                 |   |             |
| ☑ No<br>□ Yes   |   |             |
| <u> </u>  |   |             |
| 4.7   |   | \$305.00    |
| Comcast   | Last 4 digits of account number                                   |             |
| Nonpriority Creditor's Name PO Box 3002                             | When was the debt incurred?                                       |             |
| Number Street   | As of the date you file, the claim is: Check all that apply.      |             |
|   | Contingent  |             |
| Southeastern PA 19398   | Unliquidated  |             |
| City State ZIP Code   | - Disputed  |             |
| Who incurred the debt? Check one.                                   | Type of NONPRIORITY unsecured claim:                              |             |
| Debtor 1 only   | ☐ Student loans   |             |
| Debtor 2 only Debtor 1 and Debtor 2 only                            | Obligations arising out of a separation agreement or divorce      |             |
| At least one of the debtors and another                             | that you did not report as priority claims                        |             |
| Check if this claim is for a community debt                         | Debts to pension or profit-sharing plans, and other similar debts |             |
|   | Other. Specify Other  |             |
| Is the claim subject to offset?  No                                 |   |             |
| ☐ Yes   |   |             |
|   |   |             |
| 4.8   |   | \$620.55    |
| ComEd   | Last 4 digits of account number 2 0 7 5                           |             |
| Nonpriority Creditor's Name  Customer Care Center                   | When was the debt incurred?                                       |             |
| Number Street   | As of the date you file, the claim is: Check all that apply.      |             |
| P.O.Box 87522   | Contingent  |             |
| Chicago IL 60680  | Unliquidated  |             |
| City State ZIP Code   | - Disputed  |             |
| Who incurred the debt? Check one.                                   | Type of NONPRIORITY unsecured claim:                              |             |
| Debtor 1 only   | ☐ Student loans   |             |
| Debtor 2 only Debtor 1 and Debtor 2 only                            | Obligations arising out of a separation agreement or divorce      |             |
| At least one of the debtors and another                             | that you did not report as priority claims                        |             |
| Check if this claim is for a community debt                         | Debts to pension or profit-sharing plans, and other similar debts |             |
| Is the claim subject to offset?                                     | Other. Specify Utility Service                                    |             |
| No  |   |             |
| Yes   |   |             |

Debtor 1

Kenneth

C.

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First Name Middle Name

Last Name

| Part 2: Your NONPRIORITY Unsecur  | ed Claims Continuation Page   |             |
|---|---|-------------|
| After listing any entries on this page, number then previous page.  | n sequentially from the   | Total claim |
| Department of Education  Nonpriority Creditor's Name  121 S. 13th St.  Number Street  Lincoln NE 68508  City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt  Is the claim subject to offset?  No Yes | Last 4 digits of account number 9 6 1 8  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Student Loans | \$9,852.00  |
| 4.10  Department of Education  Nonpriority Creditor's Name 121 S. 13th St.  Number Street   | Last 4 digits of account number 9 6 1 8  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent  | \$7,822.00  |
| Lincoln  City State ZIP Code Who incurred the debt? Check one.  ☐ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt  Is the claim subject to offset?   | Unliquidated □ Disputed  Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Student Loans  |             |
| ✓ No  | Last 4 digits of account number 7 2 0 7  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent  | \$17,867.29 |
| Atlanta  GA 30374-0283  City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt  Is the claim subject to offset?  No Yes   | Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Student Loans   |             |

Kenneth

C.

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Debtor 1

First Name Middle Name Last Name

| Part 2: Your NONPRIORITY Unsecure   | ed Claims Continuation Page   |             |
|---|---|-------------|
| After listing any entries on this page, number then previous page.                  | n sequentially from the   | Total claim |
| 4.12  |   | \$9,724.00  |
| Discover Financial Services   | Last 4 digits of account number 2 0 8 9   |             |
| Nonpriority Creditor's Name   | When was the debt incurred?   |             |
| PO Box 15316  | As of the date you file, the claim is: Check all that apply.  |             |
| Number Street   | Contingent  |             |
| Wilmington         DE         19850           City         State         ZIP Code   | Unliquidated Disputed   |             |
| Who incurred the debt? Check one.   | Toward MONDRIODITY and a second delains   |             |
| Debtor 1 only   | Type of NONPRIORITY unsecured claim:  |             |
| Debtor 2 only   | Student loans   |             |
| Debtor 1 and Debtor 2 only  | Obligations arising out of a separation agreement or divorce that you did not report as priority claims |             |
| At least one of the debtors and another   | Debts to pension or profit-sharing plans, and other similar debts                                       |             |
| Check if this claim is for a community debt   | Other. Specify Credit Card  |             |
| Is the claim subject to offset?   | V Onion openiny order ouru  |             |
| ✓ No  |   |             |
| Yes   |   |             |
| 4.13  |   | \$435.00    |
| ENHANCED RECOVERY COMPANY   | Last 4 digits of account number 3 3 4 9   |             |
| Nonpriority Creditor's Name   | When was the debt incurred?   |             |
| P.O.Box 57547<br>Number Street  | As of the date you file, the claim is: Check all that apply.  |             |
|   | _ ☐ Contingent  |             |
| locksomville El 20044   | ☐ Unliquidated  |             |
| Jacksonville         FL         32241           City         State         ZIP Code | - Disputed  |             |
| Who incurred the debt? Check one.   | T. (NONDRIGHTY  |             |
| Debtor 1 only   | Type of NONPRIORITY unsecured claim:  |             |
| Debtor 2 only   | Student loans   |             |
| Debtor 1 and Debtor 2 only  | Obligations arising out of a separation agreement or divorce that you did not report as priority claims |             |
| At least one of the debtors and another   | Debts to pension or profit-sharing plans, and other similar debts                                       |             |
| ☐ Check if this claim is for a community debt                                       | Other. Specify Collecting for -   |             |
| Is the claim subject to offset?   | y amon aparty <u>concounts for</u>  |             |
| <b>☑</b> No   |   |             |
| Yes   |   |             |
| 4.14  |   |             |
|   |   | \$992.45    |
| LVNV Funding LLC Nonpriority Creditor's Name  | Last 4 digits of account number   |             |
| PO Box 740281   | When was the debt incurred?   |             |
| Number Street   | As of the date you file, the claim is: Check all that apply.  |             |
|   | Contingent  |             |
| Houston TX 77274  | Unliquidated  |             |
| City State ZIP Code   | - Disputed  |             |
| Who incurred the debt? Check one.   | Type of NONPRIORITY unsecured claim:  |             |
| Debtor 1 only   | Student loans   |             |
| Debtor 2 only   | Obligations arising out of a separation agreement or divorce  |             |
| Debtor 1 and Debtor 2 only  | that you did not report as priority claims  |             |
| At least one of the debtors and another   | Debts to pension or profit-sharing plans, and other similar debts                                       |             |
| Check if this claim is for a community debt   | Other. Specify Other  |             |
| Is the claim subject to offset?   |   |             |
| No Vos  |   |             |
| Yes   |   |             |

Debtor 1

Kenneth

C.

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First Name Middle Name Last Name

| Part 2: Your NONPRIORITY Unsecur   | ed Claims Continuation Page  |             |
|--|--|-------------|
| After listing any entries on this page, number then previous page.   | n sequentially from the  | Total claim |
| 4.15 Peoples Gas Nonpriority Creditor's Name   | Last 4 digits of account number  | \$427.34    |
| 130 E. Randolph St.  Number Street  Chicago IL 60601  City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?  No Yes | When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  □ Contingent □ Unliquidated □ Disputed  Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Utility |             |
| 4.16  Progressive Northern Insurance Co. Nonpriority Creditor's Name Subrogation Unit Number Street  | Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.   | \$279.09    |
| Richmond Hts OH 44143 City State ZIP Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No  | Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Other  |             |
| RBS Citizens NA Nonpriority Creditor's Name 1000 Lafayette BLVD Number Street  | Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent   | \$14,696.25 |
| Bridgeport  City State ZIP Code Who incurred the debt? Check one.  ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No Yes   | Unliquidated □ Disputed  Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Other   |             |

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Debtor 1

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First Name Middle Name Last Name

| Part 2: Your NONPRIORITY Unsecu  | red Claims Continuation Page   |                 |
|--|--|-----------------|
| After listing any entries on this page, number the previous page.  | m sequentially from the  | Total claim     |
| Atlanta  GA 30353-0942  Number Street  Atlanta  GA 30353-0942  City State ZIP Code  Who incurred the debt? Check one.  ☑ Debtor 1 only | Last 4 digits of account number 8 5 7 4  When was the debt incurred?  — As of the date you file, the claim is: Check all that apply.  — Contingent — Unliquidated — Disputed  Type of NONPRIORITY unsecured claim: — Student loans — Obligations arising out of a separation agreement or divorce that you did not report as priority claims — Debts to pension or profit-sharing plans, and other similar debts  ✓ Other. Specify Credit Card | \$1,125.85      |
| 4.19 T mobile  | Last 4 digits of account number  | \$410.00        |
| Nonpriority Creditor's Name  | When was the debt incurred?  |                 |
| C/O Debt Recovery Solutions LLC  | As of the date you file, the claim is: Check all that apply.   |                 |
| Number Street PO Box 9001  | _ ☐ Contingent   |                 |
|  | Unliquidated   |                 |
| Westbury         NY         11590-9001           City         State         ZIP Code   | — ☐ Disputed   |                 |
| Who incurred the debt? Check one.  | Type of NONDBIODITY uncoursed claims   |                 |
| Debtor 1 only  | Type of NONPRIORITY unsecured claim:  Student loans  |                 |
| Debtor 2 only  | ☐ Obligations arising out of a separation agreement or divorce   |                 |
| Debtor 1 and Debtor 2 only  At least one of the debtors and another  | that you did not report as priority claims   |                 |
|  | ☐ Debts to pension or profit-sharing plans, and other similar debts  |                 |
| Check if this claim is for a community debt  | Other. Specify Other   |                 |
| Is the claim subject to offset?  ✓ No  ☐ Yes  4.20   |  | <b>\$519.60</b> |
| T mobile   | Last 4 digits of account number  | <u>\$518.69</u> |
| Nonpriority Creditor's Name  | Last 4 digits of account number  |                 |
| C/O Debt Recovery Solutions LLC  | When was the debt incurred?  |                 |
| Number Street PO Box 9001  | As of the date you file, the claim is: Check all that apply.   |                 |
|  | _  |                 |
| Westbury         NY         11590-9001           City         State         ZIP Code   | _ ☐ Disputed   |                 |
| Who incurred the debt? Check one.  | Type of NONDRIORITY uncopyred alaims   |                 |
| ✓ Debtor 1 only  | Type of NONPRIORITY unsecured claim:  Student loans  |                 |
| Debtor 2 only  | Obligations arising out of a separation agreement or divorce   |                 |
| Debtor 1 and Debtor 2 only  At least one of the debtors and another  | that you did not report as priority claims   |                 |
|  | ☐ Debts to pension or profit-sharing plans, and other similar debts  |                 |
| Check if this claim is for a community debt  | Other. Specify Other   |                 |
| Is the claim subject to offset?  |  |                 |
| ✓ No<br>☐ Yes  |  |                 |

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Debtor 1

Part 2:

First Name Middle Name

Last Name

Your NONPRIORITY Unsecured Claims -- Continuation Page

| After listing any entries on this page, number then previous page.   | n sequentially from the  | Total claim |
|--|--|-------------|
| 4.21 T mobile Nonpriority Creditor's Name C/O Debt Recovery Solutions LLC Number Street PO Box 9001  Westbury NY 11590-9001 City State ZIP Code Who incurred the debt? Check one.  | Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:   | \$417.00    |
| ☑ Debtor 1 only     ☐ Debtor 2 only     ☐ Debtor 1 and Debtor 2 only     ☐ At least one of the debtors and another     ☐ Check if this claim is for a community debt     ☐ the claim subject to offset?     ☑ No     ☐ Yes   | <ul> <li>Student loans</li> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>Debts to pension or profit-sharing plans, and other similar debts</li> <li>✓ Other. Specify Other</li> </ul>  |             |
| Value City Nonpriority Creditor's Name HRS USA Number Street PO Box 17298  Baltimore MD 21297-1298 City State ZIP Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Yes   | Last 4 digits of account number 8 2 7 9  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Credit Card               | \$573.00    |
| 4.23  Wells Fargo Bank Nonpriority Creditor's Name P.O.Box 94435 Number Street  Albuquerque NM 87199 City State ZIP Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Yes | Last 4 digits of account number 2 5 5 1  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  □ Contingent Unliquidated □ Disputed  Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Line of credit | \$14,027.00 |

Debtor 1

Kenneth

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First Name Middle Name

Last Name

### Part 3:

## List Others to Be Notified About a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional parties to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

| Alliance One              |              |                       | On which entry in Part 1 or Part 2 did you list the original creditor? |   |  |  |
|---------------------------|--------------|-----------------------|--|---|--|--|
| Name<br>PO Box 3105       |              |                       | —<br>Line of (Check one): □  | Part 1: Creditors with Priority Unsecured Claims    |  |  |
| Number Street             |              |                       | Collecting for - T-Mobile  | Part 2: Creditors with Nonpriority Unsecured Claims |  |  |
| Southeastern              | PA           | 19398                 | Last 4 digits of account number  |   |  |  |
| City                      | State        | ZIP Code              |  |   |  |  |
| Capital managgeme         | ent Services | s LP                  | On which entry in Part 1 or Part 2                                     | 2 did you list the original creditor?               |  |  |
| Name 698 1/2 S Ogden Str  | eet          |                       | Line of (Check one):   | Part 1: Creditors with Priority Unsecured Claims    |  |  |
| Number Street             |              |                       | Collecting for - LVNV  | ·   |  |  |
| Buffalo, NY 142069-       | -2317        |                       | — Funding LLC  | Part 2: Creditors with Nonpriority Unsecured Claims |  |  |
| City                      | State        | ZIP Code              | Last 4 digits of account number  | 4 6 7 5   |  |  |
| Commonwealth Edi          | son          |                       | On which entry in Part 1 or Part 1                                     | 2 did you list the original creditor?               |  |  |
| Name                      | 3011         |                       |  | and you list the original creditor:                 |  |  |
| Bill Payment Center       | <u> </u>     |                       | Line of (Check one):   | Part 1: Creditors with Priority Unsecured Claims    |  |  |
| Number Street             |              |                       | lacksquare   | Part 2: Creditors with Nonpriority Unsecured Claims |  |  |
| Chicago                   | IL           | 60668-0001            | Last 4 digits of account number  |   |  |  |
| City                      | State        | ZIP Code              |  |   |  |  |
| Convergent Outsou         | rcing        |                       | On which entry in Part 1 or Part 2                                     | 2 did you list the original creditor?               |  |  |
| PO Box 9004               |              |                       | Line of (Check one):   | Part 1: Creditors with Priority Unsecured Claims    |  |  |
| Number Street             |              |                       | Collecting for - T-Mobile  | Part 2: Creditors with Nonpriority Unsecured Claims |  |  |
| Ponton                    | WA           | 98057                 |  |   |  |  |
| Renton<br>City            | State        | ZIP Code              | Last 4 digits of account number  |   |  |  |
|                           |              |                       |  |   |  |  |
| Credit Collection Se      | ervice       |                       | On which entry in Part 1 or Part 2                                     | 2 did you list the original creditor?               |  |  |
| 725 Canton St.            |              |                       | Line of (Check one):   | Part 1: Creditors with Priority Unsecured Claims    |  |  |
| Number Street             |              |                       | Collecting for -   | Part 2: Creditors with Nonpriority Unsecured Claims |  |  |
|                           |              |                       | ─ Progressive North  | . a. z. c. canolo murrionprioni y choccarca ciamic  |  |  |
| Norwood                   | MA           | 02062                 | Last 4 digits of account number  |   |  |  |
| City                      | State        | ZIP Code              |  |   |  |  |
| Credit Management         |              |                       | On which entry in Part 1 or Part 2                                     | 2 did you list the original creditor?               |  |  |
| Name 4200 International F | kwv          |                       | Line of (Check one):   | Part 1: Creditors with Priority Unsecured Claims    |  |  |
| Number Street             | y            |                       |  | Part 2: Creditors with Nonpriority Unsecured Claims |  |  |
|                           |              |                       | _  | . a.t. 2. Grounds was Horiphonic onscious ordina    |  |  |
| Carrollton<br>City        | TX<br>State  | <b>75007</b> ZIP Code | Last 4 digits of account number  |   |  |  |
| Ony.                      | Jiaie        | -II 000E              |  |   |  |  |

Debtor 1

Kenneth

C.

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First Name Middle Name Last Name

| Dept. of Justice                  |             |                       | On which entry in Part 1 or Part 2 did you list the original creditor?                            |
|-----------------------------------|-------------|-----------------------|---|
| Name United States Attorn         | iev         |                       | Line <b>4.9</b> of <i>(Check one):</i> $\square$ Part 1: Creditors with Priority Unsecured Claims |
| Number Street 219 S. Dearborn     |             |                       | Part 2: Creditors with Nonpriority Unsecured Claims   |
|                                   |             |                       | _   |
| Chicago<br>City                   | IL<br>State | <b>60604</b> ZIP Code | Last 4 digits of account number   |
| ERC                               |             |                       | On which entry in Part 1 or Part 2 did you list the original creditor?                            |
| Name                              |             |                       | _ , ,   |
| 8014 Bayberry Rd<br>Number Street |             |                       | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims                             |
|                                   |             |                       | Collecting for - T-Mobile Part 2: Creditors with Nonpriority Unsecured Claims                     |
| Jacksonville                      | FL          | 33256                 | Last 4 digits of account number  6 1 8 4  |
| City                              | State       | ZIP Code              | Last 4 digits of account number <u>6 1 8 4</u>  |
| Municipal Collection              | ns          |                       | On which entry in Part 1 or Part 2 did you list the original creditor?                            |
| Name<br>PO Box 327                |             |                       | Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims                            |
| Number Street                     |             |                       | Collecting for - City of Country Club Hills  — Country Club Hills  — Country Club Hills           |
| Palos Heights                     | IL          | 60463-0327            | Last 4 digits of account number   |
| City                              | State       | ZIP Code              |   |
| NCC Business Servi                | ices, Inc.  |                       | On which entry in Part 1 or Part 2 did you list the original creditor?                            |
| Name <b>PO Box 24739</b>          |             |                       | Line of (Check one):  |
| Number Street                     |             |                       | Collecting for - Value  — City  Part 2: Creditors with Nonpriority Unsecured Claims               |
| Jacksonville<br>City              | FL<br>State | <b>32241</b> ZIP Code | Last 4 digits of account number _ <u>1 _ 6 _ 0 _ 5</u>  |
| Oity                              | State       | Zii Code              |   |
| Portfolio Recovery Name           |             |                       | On which entry in Part 1 or Part 2 did you list the original creditor?                            |
| 120 Corporate Blvd.               | , Ste. 1    |                       | Lineof (Check one):   |
| Number Street                     |             |                       | Collecting for - Sam's  Part 2: Creditors with Nonpriority Unsecured Claims  Club                 |
| Norfolk                           | VA          | 23502                 | Last 4 digits of account number 8 5 7 4   |
| City                              | State       | ZIP Code              |   |
| Schlee & Stillman, L              | LC          |                       | On which entry in Part 1 or Part 2 did you list the original creditor?                            |
| Name 50 Tower Office Par          | k           |                       | Line of (Check one):  |
| Number Street                     |             |                       | Attorney for - RBS  — Citizens, NA  Part 2: Creditors with Nonpriority Unsecured Claims           |
| Woburn                            | MA          | 01801                 | Last 4 digits of account number   |
| City                              | State       | ZIP Code              |   |
| United States Attorn              | ey Genera   | I                     | On which entry in Part 1 or Part 2 did you list the original creditor?                            |
| Name <b>Dept. Of Justice</b>      |             |                       | Line 4.9 of (Check one):   Part 1: Creditors with Priority Unsecured Claims                       |
| Number Street                     |             |                       | Part 2: Creditors with Nonpriority Unsecured Claims   |
| Washington                        | DC          | 20530                 | Last 4 digits of account number   |
| City                              | State       | ZIP Code              | <del></del>   |

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Debtor 1

Kenneth

C.

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First Name Middle Name Last Name

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

|                          |     |   |                         | Total claim  |
|--------------------------|-----|---|-------------------------|--------------|
| Total claims from Part 1 | 6a. | Domestic support obligations  | 6a.                     | \$0.00       |
|                          | 6b. | Taxes and certain other debts you owe the government  | 6b.                     | \$0.00       |
|                          | 6c. | Claims for death or personal injury while you were intoxicated  | 6c.                     | \$0.00       |
|                          | 6d. | Other. Add all other priority unsecured claims. Write that amount here.                                 | <sup>6d.</sup> <b>-</b> | \$0.00       |
|                          | 6e. | <b>Total.</b> Add lines 6a through 6d.  | 6d.                     | \$0.00       |
|                          |     |   |                         | Total claim  |
| Total claims from Part 2 | 6f. | Student loans   | 6f.                     | \$0.00       |
|                          | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g.                     | \$0.00       |
|                          | 6h. | Debts to pension or profit-sharing plans, and other similar debts                                       | 6h.                     | \$0.00       |
|                          | 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | 6i. <b>-</b>            | \$107,269.36 |
|                          | 6j. | <b>Total.</b> Add lines 6f through 6i.  | 6j.                     | \$107,269.36 |

Fill in this information to identify your case: Debtor 1 Kenneth C. Tripp First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: **NORTHERN DISTRICT OF ILLINOIS** Case number ☐ Check if this is an (if known) amended filing

## Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

| 1. | Do you have any executory contracts or unexpired leases?  |
|----|---|
|    | No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.         |
|    | Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B) |

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

| Fill in this info               | 31                    |                   |                 |  |                |
|---------------------------------|-----------------------|-------------------|-----------------|--|----------------|
| Debtor 1                        | Kenneth<br>First Name | C.<br>Middle Name | Tripp Last Name |  |                |
| Debtor 2<br>(Spouse, if filing) | First Name            | Middle Name       | Last Name       |  |                |
| United States Bar               |                       |                   |                 |  |                |
| Case number (if known)          |                       |                   |                 |  | Check<br>amend |

## Official Form 106H

## **Schedule H: Your Codebtors**

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| ١. | No  Yes   | enner spouse as a codebior.)                        |
|----|---|---|
| 2. | <ol> <li>Within the last 8 years, have you lived in a community property state<br/>include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puer</li> </ol>   |   |
|    | <ul> <li>No. Go to line 3.</li> <li>Yes. Did your spouse, former spouse, or legal equivalent live with y</li> <li>No</li> <li>Yes</li> </ul>  | ou at the time?                                     |
| 3. | <ol> <li>In Column 1, list all of your codebtors. Do not include your spouse a person shown in line 2 again as a codebtor only if that person is a g creditor on Schedule D (Official Form 106D), Schedule E/F (Official F Schedule D, Schedule E/F, or Schedule G to fill out Column 2.</li> </ol> | uarantor or cosigner. Make sure you have listed the |
|    | Column 1: Your codebtor   | Column 2: The creditor to whom you owe the          |

Check all schedules that apply:

Official Form 106H Schedule H: Your Codebtors page 1

|                          |  |  | Doci   | ıment                                   | Page                        | 34 of 57                            |                |   |
|--------------------------|--|--|--|---|-----------------------------|-------------------------------------|----------------|---|
| F                        | ill in this inform   | ation to identify  | your case:   |   |                             |                                     |                |   |
|                          | Debtor 1   | Kenneth  | C.   | Tr                                      | ірр                         |                                     |                |   |
|                          |  | First Name   | Middle Name  | Las                                     | st Name                     |                                     | Che            | ck if this is:  |
|                          | Debtor 2<br>(Spouse, if filing)  | First Name   | Middle Name  | Loc                                     | st Name                     |                                     |                | An amended filing   |
|                          |  |  |  |   |                             | ole                                 |                | A supplement showing postpetition   |
|                          | United States Bankr  | uptcy Court for the:   | NORTHERN   | DISTRICT                                | OF ILLIN                    | 015                                 | _              | chapter 13 income as of the following date:   |
|                          | Case number (if known)   |  |  |   |                             |                                     |                | MM / DD / YYYY  |
| _                        | ··· 40   |  |  |   |                             |                                     |                | WWW. BB / TITE  |
|                          | fficial Form 10  |  |  |   |                             |                                     |                |   |
| Sc                       | chedule I: You   | ur Income  |  |   |                             |                                     |                | 12/15   |
| res<br>inc<br>abo<br>you | sponsible for supply<br>lude information ab<br>out your spouse. If<br>ur name and case n | ring correct information your your spouse. I more space is nee | ation. If you are<br>f you are separ<br>ded, attach a se<br>Answer every q | e married a<br>ated and y<br>parate she | nd not filing<br>our spouse | j jointly, and y<br>is not filing w | our :<br>ith y | I Debtor 2), both are equally spouse is living with you, ou, do not include information any additional pages, write |
|                          |  |  |  |   |                             |                                     |                |   |
| 1.                       | Fill in your emploinformation.   | yment  |  | Debtor 1                                |                             |                                     |                | Debtor 2 or non-filing spouse   |
|                          | If you have more th  |  | yment status   |   | oloyed                      |                                     |                | ☐ Employed  |
|                          | job, attach a separ<br>with information ab   | 9  | yment status   |   | employed                    |                                     |                | ☐ Not employed  |
|                          | additional employe   | ers.<br>Occup  | ation  | Correctional Officer                    |                             |                                     |                |   |
|                          | Include part-time, s   |  |  |   |                             |                                     |                |   |
|                          | or self-employed w   | ork. <b>Emplo</b>  | yer's name   | Illinois I                              | Dept. of Co                 | rrections                           |                |   |
|                          | Occupation may in  | Linkio   | yer's address  | PO Box                                  | 112                         |                                     |                |   |
|                          | student or homema applies.   | aker, if it  |  | Number S                                |                             |                                     |                | Number Street   |
|                          |  |  |  | Joliet, II                              | _                           |                                     |                | _   |
|                          |  |  |  |   |                             |                                     |                |   |
|                          |  |  |  |   |                             |                                     |                |   |
|                          |  |  |  | City                                    |                             | State Zip Co                        | de             | City State Zip Code   |
|                          |  | How Id   | ong employed th  | nere? 1                                 | .5 Years                    |                                     |                |   |
|                          |  |  | mg omployou ti   | .0.0.                                   |                             |                                     |                |   |
| P                        | Part 2: Give D   | etails About Mo  | onthly Incom   | е                                       |                             |                                     |                |   |
| Est                      | timate monthly inco  | ome as of the date v   | ou file this forn  | <b>n.</b> If you ha                     | ve nothina t                | o report for an                     | v line         | , write \$0 in the space. Include your  |
|                          | n-filing spouse unless   |  |  | , ,                                     |                             |                                     | ,              | , ,   |
| -                        | ou or your non-filing<br>uneed more space, a   | •  |  | er, combine                             | the informa                 | tion for all emp                    | oloye          | rs for that person on the lines below. If   |
|                          |  |  |  |   |                             | For Debtor                          | 1              | For Debtor 2 or non-filing spouse   |
| 2.                       |  | s wages, salary, ar<br>). If not paid monthly                  |  |   |                             | \$5,186                             | <u> 5.44</u>   |   |
| 3.                       | Estimate and list  | monthly overtime p   | ay.  |   | 3.                          | + \$0                               | 0.00           |   |

Official Form 106l Schedule I: Your Income page 1

4. Calculate gross income. Add line 2 + line 3.

\$5,186.44

Debtor 1 Kenneth

C.

Page 35 of 57 Case number (if known) First Name Middle Name Last Name For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here ..... \$5,186.44 List all payroll deductions: \$606.66 5a. Tax, Medicare, and Social Security deductions 5a. \$440.84 5b. Mandatory contributions for retirement plans 5b. 5c. Voluntary contributions for retirement plans 5c. \$0.00 \$0.00 5d. Required repayments of retirement fund loans 5d. 5e. Insurance 5e. \$388.48 \$0.00 5f. Domestic support obligations 5f. \$75.20 5g. Union dues 5g. 5h. Other deductions. 5h. + \$166.66 Specify: Misc. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + \$1,677.84 5g + 5h. Calculate total monthly take-home pay. Subtract line 6 from line 4. \$3,508.60 List all other income regularly received: 8a. Net income from rental property and from operating a \$0.00 business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends \$0.00 8c. Family support payments that you, a non-filing spouse, or a \$0.00 8c. dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation b8 \$0.00 8e. Social Security 8e. \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any noncash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. Specify: \$0.00 8g. Pension or retirement income 8g. \$0.00 8h. Other monthly income. 8h. 🛓 Specify: \$0.00 **Add all other income.** Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. \$0.00 Calculate monthly income. Add line 7 + line 9. \$3,508.60 \$3,508.60 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. \$0.00 Specify: 11. 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly 12 \$3,508.60 income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, Combined if it applies. monthly income 13. Do you expect an increase or decrease within the year after you file this form? None. Yes. Explain:

| F          | ill in this inform  | ation to id                  | lentify         | your case:  | 1-111            | - AUE 30111 37                               | Chr    | ck if this | vie:                            |                               |
|------------|---|------------------------------|-----------------|---|------------------|--|--------|------------|---------------------------------|-------------------------------|
|            | Debtor 1  | Kenneth<br>First Name        |                 | C.<br>Middle Name                                 | Tripp<br>Last Na |  |        | An am      | ended filing<br>element showing | postnetition                  |
|            | Debtor 2  |                              |                 |   |                  |  | ╽┖     | chapte     | r 13 expenses a                 |                               |
|            | (Spouse, if filing)                                       | First Name                   |                 | Middle Name                                       | Last Na          | ame  |        | followir   | ng date:                        |                               |
|            | United States Bankr                                       | uptcy Court fo               | or the:         | NORTHERN DI                                       | STRICT O         | FILLINOIS                                    |        | MM / D     | D / YYYY                        | <u> </u>                      |
|            | Case number (if known)                                    |                              |                 |   |                  |  |        |            |                                 |                               |
| <u>O</u> 1 | fficial Form 10   | <u>6J</u>                    |                 |   |                  |  |        |            |                                 |                               |
| So         | chedule J: Yo   | ur Expe                      | nses            |   |                  |  |        |            |                                 | 12/1                          |
| nai        | rrect information. If<br>me and case numbe                | more space<br>er (if known). | is need<br>Answ | ded, attach anoth<br>er every question            | er sheet to      | ing together, both a<br>his form. On the top | -      | -          |                                 |                               |
| I          |   | be Your Ho                   | ousen           | lola  |                  |  |        |            |                                 |                               |
| 1.         | Is this a joint case                                      | e?                           |                 |   |                  |  |        |            |                                 |                               |
|            | _ No  | ebtor 2 live in              |                 | arate household?                                  |                  | s for Separate House                         | hold o | f Debtor   | 2.                              |                               |
| 2.         | Do you have depe  | endents?                     | □ N             | No  |                  |  |        |            |                                 |                               |
|            | Do not list Debtor 1 and Debtor 2.                        | 1 and                        |                 | Yes. Fill out this information for each dependent |                  | Dependent's relati                           |        |            |                                 | Does dependent live with you? |
|            | Do not state the de names.                                | ependents'                   |                 |   |                  |  |        |            | 3                               | - ☑ Yes<br>□ No               |
|            |   |                              |                 |   |                  |  |        |            |                                 | - □ Yes<br>□ No               |
|            |   |                              |                 |   |                  |  |        |            |                                 | - 📙 Yes                       |
|            |   |                              |                 |   |                  |  |        |            |                                 | □ No<br>- □ Yes               |
|            |   |                              |                 |   |                  |  |        |            |                                 | ☐ No                          |
|            |   |                              |                 |   |                  |  |        |            |                                 | - ☐ Yes                       |
| 3.         | Do your expenses<br>expenses of peop<br>yourself and your | le other than                |                 | ✓ No<br>☐ Yes                                     |                  |  |        |            |                                 |                               |
|            |   |                              | _               |   |                  |  |        |            |                                 |                               |
|            | Part 2: Estima  | ite Your Oi                  | ngoin           | g Monthly Exp                                     | enses            |  |        |            |                                 |                               |
| to         |   | of a date after              | er the b        |   | -                | re using this form as supplemental Sche      |        |            | •                               |                               |
|            | lude expenses paid<br>ch assistance and h                 |                              |                 | <del>-</del>                                      | -                |  |        |            | Your expens                     | ses                           |
| 4.         | The rental or hom<br>Include first mortga                 |                              |                 |   |                  |  |        |            | 4.                              |                               |
|            | If not included in  | •                            |                 | J   |                  |  |        |            |                                 |                               |
|            | 4a. Real estate ta  | axes                         |                 |   |                  |  |        |            | 4a                              | \$80.00                       |
|            | 4b. Property, hom   | neowner's, or                | renter's        | insurance   |                  |  |        |            | 4b                              | \$80.00                       |
|            | 4c. Home mainte   | nance, repair,               | , and up        | keep expenses                                     |                  |  |        |            | 4c                              | \$30.00                       |

4d. Homeowner's association or condominium dues

4d.

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Debtor 1 Kenneth

Last Name First Name Middle Name

|     |   | Your exper | ises     |
|-----|---|------------|----------|
| 5.  | Additional mortgage payments for your residence, such as home equity loans  | 5.         | \$200.00 |
| 6.  | Utilities:  |            |          |
|     | 6a. Electricity, heat, natural gas  | 6a.        | \$250.00 |
|     | 6b. Water, sewer, garbage collection  | 6b         | \$120.00 |
|     | 6c. Telephone, cell phone, Internet, satellite, and cable services  | 6c         | \$100.00 |
|     | 6d. Other. Specify: cell phone  | 6d.        | \$120.00 |
| 7.  | Food and housekeeping supplies  | 7.         | \$400.00 |
| 8.  | Childcare and children's education costs  | 8.         | \$475.00 |
| 9.  | Clothing, laundry, and dry cleaning   | 9.         | \$180.00 |
| 10. | Personal care products and services   | 10.        | \$50.00  |
| 11. | Medical and dental expenses   | 11         | \$50.00  |
| 12. | <b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.  | 12.        | \$375.00 |
| 13. | Entertainment, clubs, recreation, newspapers, magazines, and books  | 13.        | \$80.00  |
| 14. | Charitable contributions and religious donations  | 14.        |          |
| 15. | Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.   |            |          |
|     | 15a. Life insurance   | 15a        |          |
|     | 15b. Health insurance   | 15b        |          |
|     | 15c. Vehicle insurance  | 15c        | \$140.00 |
|     | 15d. Other insurance. Specify:  | 15d.       |          |
| 16. | <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:  | 16.        |          |
| 17. | Installment or lease payments:  |            |          |
|     | 17a. Car payments for Vehicle 1 2012 Volkswagon CC  | 17a        | \$499.00 |
|     | 17b. Car payments for Vehicle 2   | 17b        |          |
|     | 17c. Other. Specify: Emergency  | 17c        | \$100.00 |
|     | 17d. Other. Specify: Miscellaneous  | 17d        | \$100.00 |
| 18. | Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18.        |          |
| 19. | Other payments you make to support others who do not live with you.  Specify:   | 19.        |          |
| 20. | Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.   |            |          |
|     | 20a. Mortgages on other property  | 20a.       |          |
|     | 20b. Real estate taxes  | 20b        |          |
|     | 20c. Property, homeowner's, or renter's insurance   | 20c        |          |
|     | 20d. Maintenance, repair, and upkeep expenses   | 20d        |          |
|     | 20e. Homeowner's association or condominium dues  | 20e.       |          |
|     |   |            |          |

| Deb | tor 1   | Case 16-01078<br>Kenneth                      | Doc 1 <b>c</b> . | Filed 01/14/16<br>Document  | Entered 01/<br>Page 38 of 5 | /14/16 11:21:27<br>7<br>Case number (if know | Desc Main  |
|-----|---|---|------------------|-----------------------------|-----------------------------|--|------------|
| 000 |   | First Name                                    | Middle Name      | Last Name                   |                             | Case Hamber (II know                         |            |
| 21. | Othe  | r. Specify:                                   |                  |                             |                             | 21.  | +          |
| 22. | Calc  | ulate your monthly exp                        | enses.           |                             |                             | ſ  |            |
|     | 22a.  | Add lines 4 through 21                        |                  |                             |                             | 22a.   | \$3,429.00 |
|     | 22b.  | Copy line 22 (monthly                         | expenses for D   | Debtor 2), if any, from Off | icial Form 106J-2.          | 22b.   |            |
|     | 22c.  | Add line 22a and 22b.                         | The result is y  | our monthly expenses.       |                             | 22c.   | \$3,429.00 |
| 23. | Calc  | ulate your monthly net                        | income.          |                             |                             | ·  |            |
|     | 23a.  | Copy line 12 (your com                        | nbined monthly   | income) from Schedule       | I.                          | 23a.   | \$3,508.60 |
|     | 23b.  | Copy your monthly exp                         | enses from lin   | e 22c above.                |                             | 23b  | \$3,429.00 |
|     | 23c.  | Subtract your monthly The result is your mont |                  |                             |                             | 23c.   | \$79.60    |
| 24. | Do y  | ou expect an increase                         | or decrease in   | your expenses within        | the year after you f        | ile this form?                               |            |
|     | For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? |   |                  |                             |                             |  |            |
|     | =   | No.<br>Yes. Explain here:                     |                  |                             |                             |  |            |
|     |   | None.   |                  |                             |                             |  |            |

| Fill in this inf       | ormation to i         | dentify your case         | :                  |          |
|------------------------|-----------------------|---------------------------|--------------------|----------|
| Debtor 1               | Kenneth<br>First Name | C. Middle Name            | Tripp  Last Name   |          |
| Debtor 2               | riist Name            | Middle Name               | Last Name          |          |
| (Spouse, if filing)    | First Name            | Middle Name               | Last Name          |          |
| United States Bar      | nkruptcy Court fo     | or the: <b>NORTHERN D</b> | ISTRICT OF ILLINOI | <u>s</u> |
| Case number (if known) |                       |                           |                    |          |

#### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

#### Part 1: Summarize Your Assets

|    |  | Your assets<br>Value of what you own |
|----|--|--------------------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B)  |                                      |
|    | 1a. Copy line 55, Total real estate, from Schedule A/B   | \$25,000.00                          |
|    | 1b. Copy line 62, Total personal property, from Schedule A/B   | \$13,730.00                          |
|    | 1c. Copy line 63, Total of all property on Schedule A/B  | \$38,730.00                          |
| Р  | art 2: Summarize Your Liabilities  |                                      |
|    |  | Your liabilities<br>Amount you owe   |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$41,299.00                          |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                           | \$0.00                               |
|    |  |                                      |
|    | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$107,269.36                         |

#### Part 3: Summarize Your Income and Expenses

| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$3,508.60 |
|----|---|------------|
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J.    | \$3,429.00 |

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Debtor 1 Kenneth C. Dottiment Page 40 of 5 Thumber (if known)

First Name Middle Name Last Name

| Part 4: Answer These Questions for Administr | rative and Statistical Records |
|--|--------------------------------|
|--|--------------------------------|

| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13?   |
|----|--|
|    | No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  Yes  |
| 7. | What kind of debt do you have?   |
|    | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. |
|    | Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  |
| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.   |
| _  |  |

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Total claim |
|--|-------------|
| From Part 4 on Schedule E/F, copy the following:   |             |
| 9a. Domestic support obligations. (Copy line 6a.)  | \$0.00      |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$0.00      |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$0.00      |
| 9d. Student loans. (Copy line 6f.)   | \$0.00      |
| <ol> <li>Obligations arising out of a separation agreement or divorce that you did not report as<br/>priority claims. (Copy line 6g.)</li> </ol> | \$0.00      |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)   | +\$0.00     |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$0.00      |

|   |   | Doc               | <u>rument Page</u>     | <u>41 of</u> 57 |  |  |  |
|---|---|-------------------|------------------------|-----------------|--|--|--|
| Fill in this inf  | Fill in this information to identify your case: |                   |                        |                 |  |  |  |
| Debtor 1  | Kenneth<br>First Name                           | C.<br>Middle Name | <b>Tripp</b> Last Name |                 |  |  |  |
| Debtor 2<br>(Spouse, if filing)                                       | First Name                                      | Middle Name       | Last Name              |                 |  |  |  |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS |   |                   |                        |                 |  |  |  |
| Case number (if known) Check if this is an amended filing             |   |                   |                        |                 |  |  |  |
| Official Form 106Dec  |   |                   |                        |                 |  |  |  |

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below  |  |  |  |  |
|---|--|--|--|--|
| Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? |  |  |  |  |
| <b>☑</b> No   |  |  |  |  |
| Yes. Name of person   | Attach Bankruptcy Petition Preparer's Notice,                          |  |  |  |
|   | Declaration, and Signature (Official Form 119).                        |  |  |  |
|   |  |  |  |  |
| Under penalty of perjury I declare that I have read to  | ne summary and schedules filed with this declaration and that they are |  |  |  |
| true and correct.   | le summary and schedules med with this declaration and that they are   |  |  |  |
| V /a/Vannath C Tring  | v  |  |  |  |
| X /s/ Kenneth C. Tripp Signature of Debtor 1  | Signature of Debtor 2  |  |  |  |
| Date 01/14/2016   | Date   |  |  |  |
| MM / DD / YYYY  | MM / DD / YYYY   |  |  |  |

|                                 |   | Doc               | ument Pa           | ae 42 of 57 |  |                                    |
|---------------------------------|---|-------------------|--------------------|-------------|--|------------------------------------|
| Fill in this inf                | ormation to i   | dentify your case | :                  |             |  |                                    |
| Debtor 1                        | Kenneth<br>First Name   | C.<br>Middle Name | Tripp<br>Last Name |             |  |                                    |
| Debtor 2<br>(Spouse, if filing) | First Name  | Middle Name       | Last Name          |             |  |                                    |
| United States Bar               | United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS |                   |                    |             |  |                                    |
| Case number (if known)          |   |                   |                    | -           |  | Check if this is an amended filing |
|                                 |   |                   |                    |             |  |                                    |
| Official Form 107               |   |                   |                    |             |  |                                    |
| Statement o                     | Statement of Financial Affairs for Individuals Filing for Bankruptcy  |                   |                    |             |  |                                    |

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write

your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before What is your current marital status? ■ Married ✓ Not married During the last 3 years, have you lived anywhere other than where you live now? Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1: **Dates Debtor 1** Debtor 2: **Dates Debtor 2** lived there lived there Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

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Debtor 1

Kenneth Doouppent First Name Middle Name

|   | Part 2: | Explain the Sources of Your Income  |
|---|---------|---|
| 4 | •       | have any income from employment or from operating a business during this year or the two previous calendar years? |

| 4.                                 | Fill in the total amount of income you receil from a joint case and you have in   | ved from all jobs and all bus                            | inesses, including par                               | t-time activities.                         | indar years?   |
|------------------------------------|---|--|--|--|--|
|                                    | ☐ No ☐ Yes. Fill in the details.  |  |  |  |  |
|                                    |   | Debtor 1   |  | Debtor 2                                   |  |
|                                    |   | Sources of income<br>Check all that apply.               | Gross income<br>(before deductions<br>and exclusions | Sources of income<br>Check all that apply. | Gross income<br>(before deductions<br>and exclusions |
|                                    | m January 1 of the current year until date you filed for bankruptcy:  | Wages, commissions, bonuses, tips                        | \$0.00   | Wages, commissions, bonuses, tips          |  |
|                                    |   | Operating a business                                     |  | Operating a business                       |  |
| For the last calendar year:        |   | Wages, commissions, bonuses, tips                        | \$64,406.64  | Wages, commissions, bonuses, tips          |  |
| (Jai                               | nuary 1 to December 31, 2015 )  | Operating a business                                     |  | Operating a business                       |  |
| For the calendar year before that: |   | Wages, commissions, bonuses, tips                        | \$39,784.00  | Wages, commissions, bonuses, tips          |  |
| (Jai                               | nuary 1 to December 31, 2014 )  | Operating a business                                     |  | Operating a business                       |  |
| 5.                                 | Did you receive any other income during Include income regardless of whether that unemployment; and other public benefit pa and gambling and lottery winnings. If you a Debtor 1. | income is taxable. Example ayments; pensions; rental inc | s of other income are<br>come; interest; dividend    | ds; money collected from law               | vsuits; royalties;                                   |
|                                    | List each source and the gross income from  | m each source separately. [                              | Do not include income                                | that you listed in line 4.                 |  |
|                                    |   |  |  |  |  |

✓ No

Yes. Fill in the details.

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Kenneth Debtor 1

Middle Name

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still owe

Include creditor's name

First Name

| P  | art 3:                       | List Ce  | ertain Payments Y   | ou Made Befor                                  | e You Fi                    | led for Ba                  | ankruptcy                                   |  |  |
|----|------------------------------|--|---|--|-----------------------------|-----------------------------|---|--|--|
| 6. | Are eithe                    | er Debtor  | 1's or Debtor 2's debt  | ts primarily consu                             | mer debts?                  | ?                           |   |  |  |
|    | □ No.                        | <b>Neither Debtor 1 nor Debtor 2 has primarily consumer debts.</b> Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."   |   |  |                             |                             |   |  |  |
|    |                              | During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225* or more?  |   |  |                             |                             |   |  |  |
|    |                              | ☐ No.  | Go to line 7.   |  |                             |                             |   |  |  |
|    |                              | ☐ Yes  | . List below each creditotal amount you paid child support and alin | that creditor. Do n                            | ot include p                | payments fo                 | r domestic support of                       | obligations, such as   |  |
|    |                              | * Subje  | ct to adjustment on 4/0   | 1/16 and every 3 ye                            | ars after th                | at for cases                | filed on or after the                       | date of adjustment.  |  |
|    | <b>∀</b> Yes.                | Debtor   | 1 or Debtor 2 or both   | have primarily cor                             | nsumer del                  | ots.                        |   |  |  |
|    | _                            | During   | the 90 days before you  | filed for bankruptcy                           | , did you pa                | ay any credi                | tor a total of \$600 or                     | more?  |  |
|    |                              | ₩ No.  | Go to line 7.   |  |                             |                             |   |  |  |
|    |                              | Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. |   |  |                             |                             |   |  |  |
|    |                              |  |   | Dates of paymen                                |                             | l amount                    | Amount you stil owe                         | Was this payment for   |  |
| 7. | Insiders corporati agent, in | include you<br>ons of wh<br>cluding or   | our relatives; any gener<br>nich you are an officer, o              | al partners; relative<br>director, person in c | s of any ge<br>ontrol, or o | neral partne<br>wner of 20% | ers; partnerships of voor more of their vot | e who was an insider?  which you are a general partner;  ing securities; and any managing  ts for domestic support obligations |  |
|    | ✓ No<br>☐ Yes.               | List all p   | ayments to an insider.  |  |                             |                             |   |  |  |
|    |                              |  |   | Dates of paymen                                |                             | l amount                    | Amount you still owe                        | Reason for this payment  |  |
| 8. |                              | year befo  | •   | ruptcy, did you ma                             | ke any pay                  | ments or tr                 | ransfer any propert                         | y on account of a debt that  |  |
|    | Include p                    | ayments  | on debts guaranteed or  | r cosigned by an ins                           | sider.                      |                             |   |  |  |
|    | ✓ No<br>☐ Yes.               | List all p   | ayments that benefited  | an insider.                                    |                             |                             |   |  |  |
|    |                              |  |   | Dates of                                       | Tota                        | l amount                    | Amount vou                                  | Reason for this payment  |  |

paid

payment

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Debtor 1

Kenneth

C.

Doouppent

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First Name Middle Name Last Name

| Part 4:   | Identify Legal A | ctions, Repossessions, | and Foreclosures  |
|-----------|------------------|------------------------|-------------------|
| · art -r. | idoning Logai /  | otiono, itopococoiono, | ana i oroolooaroo |

| 9.  | -  | sonal injury cases, small claims | y in any lawsuit, court action, or adisactions, divorces, collection suits, pa |                              |
|-----|--|----------------------------------|--|------------------------------|
|     | ✓ No ☐ Yes. Fill in the details.   |                                  |  |                              |
|     |  | Nature of the case               | Court or agency  | Status of the case           |
| 10. | Within 1 year before you filed for seized, or levied? Check all that apply and fill in the did |                                  | property repossessed, foreclosed,  | garnished, attached,         |
|     | No. Go to line 11. Yes. Fill in the information below  | ow.                              |  |                              |
| 11. | Within 90 days before you filed for amounts from your accounts or it                           |                                  | or, including a bank or financial inst<br>cause you owed a debt?               | itution, set off any         |
|     | <ul><li>✓ No</li><li>✓ Yes. Fill in the details.</li></ul>                                     |                                  |  |                              |
| 12. | Within 1 year before you filed for creditors, a court-appointed rece                           |                                  | property in the possession of an asofficial?                                   | ssignee for the benefit of   |
|     | ✓ No<br>Yes  |                                  |  |                              |
| Pa  | art 5: List Certain Gifts a  | nd Contributions                 |  |                              |
| 13. | Within 2 years before you filed fo   | r bankruptcy, did you give a     | ny gifts with a total value of more th   | an \$600 per person?         |
|     | <ul><li>✓ No</li><li>☐ Yes. Fill in the details for each</li></ul>                             | gift.                            |  |                              |
| 14. | Within 2 years before you filed fo to any charity?   | r bankruptcy, did you give a     | ny gifts or contributions with a total   | value of more than \$600     |
|     | <ul><li>✓ No</li><li>✓ Yes. Fill in the details for each</li></ul>                             | gift or contribution.            |  |                              |
| Pa  | art 6: List Certain Losses   | <b>;</b>                         |  |                              |
| 15. | Within 1 year before you filed for other disaster, or gambling?                                | bankruptcy or since you file     | d for bankruptcy, did you lose anyth   | ning because of theft, fire, |
|     | <ul><li>✓ No</li><li>✓ Yes. Fill in the details.</li></ul>                                     |                                  |  |                              |
|     |  |                                  |  |                              |

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Debtor 1

Kenneth

Doouppent

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First Name Middle Name

| Part 7:   | List Certain Pa           | yments or       | Transfers  |                              |                   |
|---|---------------------------|-----------------|--|------------------------------|-------------------|
| 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? |                           |                 |  |                              |                   |
| Include a   | any attorneys, bankru     | ptcy petition p | preparers, or credit counseling agencies for services requi                    | red for your bankrupt        | cy.               |
| ☐ No<br>☑ Yes.  | Fill in the details.      |                 |  |                              |                   |
| bothcourse  | es.com                    |                 | Description and value of any property transferred \$9.95 for Credit Counseling | Date payment or transfer was | Amount of payment |
| Person Who W  | as Paid                   |                 | _  | made                         |                   |
|   |                           |                 |  | 01/05/2016                   | \$9.95            |
| Number Stre   | et                        |                 | -  |                              |                   |
|   |                           |                 | -  |                              |                   |
| City  | State                     | ZIP Code        | _  |                              |                   |
| bothcourse  | s.com                     |                 |  |                              |                   |
| Email or website  | e address                 |                 | -  |                              |                   |
| Person Who Ma   | ade the Payment, if Not Y | ou ou           | _  |                              |                   |
|   |                           |                 | Description and value of any property transferred                              | Date payment                 | Amount of         |
| Robert J. Adams & Associates Person Who Was Paid  |                           | s               | Down payment for representation in   | or transfer was              | payment           |
|   |                           |                 | bankruptcy case  |                              |                   |
| 901 W. Jack   |                           |                 | _  | 01/05/2016                   | \$64.00           |
| Number Stre   | et                        |                 |  |                              |                   |
| Ste. 202  |                           |                 |  |                              |                   |

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

60607

ZIP Code

IL

State

**☑** No

Email or website address

Chicago

Yes. Fill in the details.

Person Who Made the Payment, if Not You

|      | Case 16-01078 Doc 1 Filed 01/14/16 Entered 01/14/16 11:21:27 Desc Main   |  |  |  |  |  |  |
|------|--|--|--|--|--|--|--|
| Debt | or 1 Kenneth C. DOTUPNENT Page 47 Offa SeThumber (if known) First Name Middle Name Last Name   |  |  |  |  |  |  |
| 18.  | Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property). |  |  |  |  |  |  |
|      | Do not include gifts and transfers that you have already listed on this statement.  No Yes. Fill in the details.   |  |  |  |  |  |  |
| 19.  | Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No  |  |  |  |  |  |  |
|      | Yes. Fill in the details.  |  |  |  |  |  |  |
| Pa   | List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units  |  |  |  |  |  |  |
| 20.  | Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?   |  |  |  |  |  |  |
|      | Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.  |  |  |  |  |  |  |
|      | ✓ No  Yes. Fill in the details.  |  |  |  |  |  |  |
| 21.  | Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?   |  |  |  |  |  |  |
|      | ✓ No  Yes. Fill in the details.  |  |  |  |  |  |  |
| 22.  | Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?  ✓ №   |  |  |  |  |  |  |
|      | Yes. Fill in the details.  |  |  |  |  |  |  |
| Pa   | rt 9: Identify Property You Hold or Control for Someone Else   |  |  |  |  |  |  |
| 23.  | Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.   |  |  |  |  |  |  |
|      | ✓ No ☐ Yes. Fill in the details.   |  |  |  |  |  |  |
|      |  |  |  |  |  |  |  |

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Debtor 1

Kenneth First Name

Dooippent

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**Part 10: Give Details About Environmental Information** 

Middle Name

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.

|     | substance, hazardous material, pollutant, contaminant, or similar item.  |  |  |  |  |  |  |
|-----|--|--|--|--|--|--|--|
| Rep | port all notices, releases, and proceedings that you know about, regardless of when they occurred.   |  |  |  |  |  |  |
| 24. | Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?   |  |  |  |  |  |  |
|     | <ul><li>No</li><li>Yes. Fill in the details.</li></ul>   |  |  |  |  |  |  |
| 25. | Have you notified any governmental unit of any release of hazardous material?  ✓ No  ✓ Yes. Fill in the details.   |  |  |  |  |  |  |
| 26. | Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.  |  |  |  |  |  |  |
|     | ✓ No  Yes. Fill in the details.  |  |  |  |  |  |  |
| Ρ   | art 11: Give Details About Your Business or Connections to Any Business  |  |  |  |  |  |  |
| 27. | Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?   |  |  |  |  |  |  |
|     | A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  A member of a limited liability company (LLC) or limited liability partnership (LLP)  A partner in a partnership  An officer, director, or managing executive of a corporation  An owner of at least 5% of the voting or equity securities of a corporation |  |  |  |  |  |  |
|     | <ul><li>✓ No. None of the above applies. Go to Part 12.</li><li>✓ Yes. Check all that apply above and fill in the details below for each business.</li></ul>   |  |  |  |  |  |  |
| 28. | Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.   |  |  |  |  |  |  |
|     | □ No □ Yes. Fill in the details below.   |  |  |  |  |  |  |

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Debtor 1 Kenneth C. DODUMNENT Page 49 Ofasa Thumber (if known)

Last Name

Last Name

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Χ   | /s/ Kenneth C. Tripp                       | X   |
|-----|--|---|
|     | Signature of Debtor 1                      | Signature of Debtor 2   |
|     | Date01/14/2016                             | Date  |
| Dic | l you attach additional pages to Your Stat | ement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? |
| V   | No   |   |
|     | Yes  |   |
| Dic | I you pay or agree to pay someone who is   | s not an attorney to help you fill out bankruptcy forms?                              |
| V   | No   |   |
| _   | Yes. Name of person                        | Attach the Bankruptcy Petition Preparer's Notice,                                     |
| _   |  | Declaration, and Signature (Official Form 119).                                       |

| Fill in this information to identify your case:                       |            |             |           |  |
|---|------------|-------------|-----------|--|
| Debtor 1  | Kenneth    | C.          | Tripp     |  |
|   | First Name | Middle Name | Last Name |  |
| Debtor 2  |            |             |           |  |
| (Spouse, if filing)   | First Name | Middle Name | Last Name |  |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS |            |             |           |  |
| Case number   |            |             |           |  |
| (if known)  |            |             |           |  |

#### Official Form 108

#### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Hold Secured Claims

| For any creditors that you listed in Part 1 of Schedule D: Creditors Who Hold Claims Secured by Property (Official Form 106D), fill in the information below. |  |   |   |  |  |  |
|---|--|---|---|--|--|--|
| Identify the cre  | editor and the property that is collateral | What do you intend to do with the property that secures a debt?                                 | Did you claim the property as exempt on Schedule C? |  |  |  |
| Creditor's name:  | First Midwest Bank                         | Surrender the property.  Retain the property and redeem it.                                     | □ No<br>□ Yes                                       |  |  |  |
| Description of property securing debt:  | Single Family Home                         | Retain the property and enter into Reaffirmation Agreement.  Retain the property and [explain]: | a   |  |  |  |
| Creditor's name:  | Santander Consumer USA                     | Surrender the property.  Retain the property and redeem it.                                     | □ No<br>□ Yes                                       |  |  |  |
| Description of property securing debt:  | 2012 Volskwagen CC                         | Retain the property and enter into Reaffirmation Agreement.  Retain the property and [explain]: | a   |  |  |  |

Doc 1 Entered 01/14/16 11:21:27 Case 16-01078 Filed 01/14/16 Page 51 of 57 Case number (if known) C. Debtor 1 Kenneth First Name Middle Name Last Name Part 2: **List Your Unexpired Personal Property Leases** For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). Describe your unexpired personal property leases Will this lease be assumed? None. Part 3: Sign Below Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and personal property that is subject to an unexpired lease. X /s/ Kenneth C. Tripp Signature of Debtor 2 Signature of Debtor 1

MM / DD / YYYY

Date

Date 01/14/2016

MM / DD / YYYY

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.
   Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

# The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liqudation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

#### **Chapter 7: Liquidation**

| + | \$75  | filing fee<br>administrative fee<br>trustee surcharge |
|---|-------|---|
|   | \$335 | total fee   |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans:
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form-sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

| + |         | filing fee<br>administrative fee |
|---|---------|----------------------------------|
|   | \$1.717 | total fee                        |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

\$200 filing fee \$75 administrative fee \$275 total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

\$235 filing fee \$75 administrative fee \$310 total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

# Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html.

In Alabama and North Carolina, go to:

 $\frac{http://www.uscourts.gov/FederalCourts/Bankruptcy/Ba$ 

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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B2030 (Form 2030) (12/15)

#### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

| In   | re Kenneth C. Tripp   | Case No.                      |                             |
|--|---|-------------------------------|-----------------------------|
|  |   | Chapter                       | 7                           |
|  | DISCLOSURE OF COMPENS   | SATION OF ATTORNEY FOR        | DEBTOR                      |
| 1.   | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) are that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: |                               |                             |
|  | For legal services, I have agreed to accept   | <u>\$1</u>                    | 1,500.00                    |
|  | Prior to the filing of this statement I have received   | <u></u>                       | \$64.00                     |
|  | Balance Due   | <u>\$</u>                     | 1,436.00                    |
| 2.   | The source of the compensation paid to me was:  Debtor  Other (specify)   |                               |                             |
| 3.   | The source of compensation to be paid to me is:   |                               |                             |
|  | ☑ Debtor ☐ Other (specify)  |                               |                             |
| 4.   | I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.  |                               |                             |
|  | ☐ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.   |                               |                             |
| 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankr |   | e bankruptcy case, including: |                             |
|  | a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;  |                               |                             |
|  | Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;  |                               |                             |
| c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjour         |   |                               | adjourned hearings thereof; |

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B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

#### CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

01/14/2016 /s/ Robert J. Adams & Associates

Date Robert J. Adams & Associates
Robert J Adams & Associates

901 W Jackson Suite 202 Chicago, IL 60607

Phone: (312) 346-0100 / Fax: (312) 346-6228

Bar No. 0013056

/s/ Kenneth C. Tripp

Kenneth C. Tripp